

## MINUTES OF THE CASWELL COUNTY BOARD OF HEALTH

The Caswell County Board of Health met at 7:00 P.M. on Tuesday, July 23, 2013 in the Caswell County Health Department's downstairs meeting room in Yanceyville, North Carolina.

### ATTENDANCE:

Position	Name	Present	Not Present
County Commissioner	Nate Hall	X	
Pharmacist	Andrew Foster, Pharm. D, R.Ph.	X	
Dentist	Rose Satterfield, DMD	X	
Veterinarian	Donald Fuller, DVM	X	
Physician (Gen. Pub.)	Cecil Page		X
Registered Nurse (Gen. Pub.)	Sharon Kupit	X	
Engineer (Gen. Pub.)	Ricky McVey	X	
Optometrist (Gen. Pub.)	Carl Carroll		X
General Public	Keisha King	X	
General Public	Elin Armeau-Claggett, PA-C, PhD	X	
General Public	Sally Wallace		X

Others Present: Frederick Moore, MD – Health Director  
Sharon Hendricks – Finance Officer

### I. Call to Order

- A. The Annual Meeting of the Caswell County Board of Health was called to order by the Secretary, Dr. Moore, at 7:00 P.M.
- B. Dr. Moore explained that, according to the By Laws, the Secretary presided at the Annual Meeting until the Chair was elected and the meeting would then be turned over to the Chair to officiate.

### II. Election

- A. Dr Fuller commented that he appreciated the opportunity to serve as chair for the last few years but he would decline any nomination to be an officer.
- B. Dr. Fuller nominated Andrew Foster to be Chair and Elin Claggett seconded the nomination.
- C. There was a general discussion about the duties and responsibilities of the Chair.
- D. Rick McVey, Rose Satterfield, Elin Claggett, and Keisha King all declined nomination.
- E. Dr. Fuller then nominated Elin Claggett as Vice Chair and motioned to close further nominations. Rose Satterfield seconded the motion.
- F. Andrew Foster was then elected as Chair and Elin Claggett elected as Vice Chair by a vote of 8 to 0.
- G. The Secretary then turned the meeting over to the new Chair.

### III. Public Comment

- A. None

### IV. Action Items

- A. Approval of Minutes

A motion was made by Elin Claggett and seconded by Rose Satterfield, to approve the May 28, 2013 Minutes of the Board Of Health as distributed in the packet. The motion carried on a vote of 8 to 0.

- B. Budget Amendment #5
  1. Budget Amendment #5 is the last budget amendment for Fiscal Year 2012-2013 that ended June 30, 2013. The amendment moved funds from one line to another to finalize the budget and make sure everything balanced. The Budget

Amendment did not cause either an over all increase or decrease in the budget.

A motion was made by Donald Fuller and seconded by Nate Hall, to approve Budget Amendment #5 as presented in the packet. The motion carried on a vote of 8 to 0.

**V. Informational Items**

**A. FY 2012-2013 Preliminary Budget Summary**

1. Dr. Moore reported that the end of fiscal year report on actual revenue and expense showed that the Health Department finished the year at 92% of total budgeted expenses and almost 94% of budgeted revenue.
2. We received the Medicaid cost settlement at the very end of FY 12-13 in the amount of about \$191,000.
3. The County Finance Office has not yet finished entering in all of the revenue and expenses for FY 12-13 and the auditors have not yet approved the figures, so the following is just an estimate.
  - a. The Health Department started FY 12-13 with \$712,991 in its fund balance and it appears that we used about \$170,000 of the \$256,000 of fund balance that was budgeted for use during FY 12-13.
  - b. Therefore, the estimated, total Health Department fund balance at the end of FY 12-13 was about \$542,000 and we budgeted in \$286,000 of fund balance into the FY 13-14 budget.
  - c. Dr. Moore briefly reviewed the history of Health Department budgets to see how this year compared to other years.

**B. FY 2013-2014 Budget**

1. Dr. Moore pointed out in the packet the \$3,105,817 Board of County Commissioners approved budget for the Health Department for FY 13-14. He told the board that the Board of County Commissioners approved budget was not very different from the budget that the Board of Health approved.
2. He commented that County Tax Appropriation makes up about 12% of the Health Department budget and State Grants about 20%. The rest of the budget is paid for with earned income and fund balance.

**C. New Board of Health Member**

1. Dr. Moore introduced Sharon Kupit as the newest Board of Health member and welcomed her to the board.
2. Ms. Kupit used to work at the Health Department in the 1980's and 1990's as a Physician Assistant.

**D. Dr. Moore reminded board members who have not completed the online orientation for Board of Health members provided by the NC Institute for Public Health to do so and turn in the certificate of completion as orientation is required for accreditation.**

**E. Dr. Moore reviewed the Statistical Reports included in the packet. These included reports on Environmental Health, Clinic Visits and Home Health activities.**

**F. Dr. Moore discussed some of the problems the Health Department was having with the new Medicaid computer program called NC Tracks. The problems are affecting everyone who uses Medicaid in the state including hospitals, doctor's offices, pharmacies, health departments and patients. It is expected that this will significantly impact or revenue in the first quarter of the fiscal year.**

**G. Dr. Moore said the Health Department was in the process of filling or had recently filled several vacancies including the Breastfeeding Peer Counselor, Medical Office Assistant, Nurse Practitioner and four Home Health Nurses. With all these vacancies, staff have had to do a lot of filling in and covering, which at times have left some things undone. In addition there is going to be a nurse retire in December and a CAP Social Worker is going out on maternity leave in October.**

- H. Dr. Moore was asked how the cross training between the Clinic and Home Health was going. Dr. Moore said that we were so short staffed at present that there was not time to cross train but once we were fully staffed we would look into that.
- I. Dr. Moore informed the board that some of the "state" funds were going to be cut due to actions taken by the state legislature as well as the federal government. He was not sure how much this was going to affect the Health Department's share of these funds.

**VI. Adjournment**

The chairman declared the Board of Health meeting adjourned. There was no objection from the membership.

Approved By: \_\_\_\_\_  
Health Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Board of Health

\_\_\_\_\_  
Date

## **Health Director's Report – September 24, 2013**

### **I. Board of Health**

- A. If board members have not yet completed their online orientation, they are encouraged to do so. This can be found at the following link:  
[http://www2.sph.unc.edu/nciph/local\\_boards\\_of\\_health\\_training\\_19511\\_12491.html](http://www2.sph.unc.edu/nciph/local_boards_of_health_training_19511_12491.html). In addition the Institute for Public health has some training for Board of Health members. Is this something that the board would like for Dr. Moore to arrange?
- B. If board members have not signed the conflict of interest and the confidentiality statement please be prepared to sign this at the meeting.

### **II. Finance Report**

- A. We are still waiting on the final revenue and expense figures from the county for last fiscal year. Last year we did not receive the audited figures until January.
- B. The report included in the packet shows how actual revenue and expense compares to the budget through the end of August (16% of the fiscal year). According to this report the Health Department is at 14% of total budgeted expenses and 9% of budgeted revenue.
- C. Budget Amendment #1
  - 1. This Budget Amendment is included in the packet and decreases the overall budget by \$2,925. The reduction is due to a cut in the state funds for Maternal Health and Family Planning.
  - 2. The Budget Amendment also moves some funds between line items to cover expenses.

### **III. Accreditation and Tobacco**

- A. We are preparing for Health Department Accreditation next spring and one of the accreditation standards deals with restricting tobacco use within 50 feet of the Health Department.
  - 1. *STANDARD: Facilities and Administrative Services*
    - a. *Benchmark 30: The local health department shall provide safe and accessible physical facilities and services.*
      - 1) *Activity 30.10: The local health department shall make efforts to prohibit the use of tobacco in all areas and grounds within fifty (50) feet of the health department facility.*
    - b. *Documentation:*
      - 1) *Evidence that the agency may prohibit the use of tobacco use within 50 feet by vote of the Board of Health or the Board of County Commissioners for ALL department facilities; OR*
      - 2) *Evidence that a request to prohibit the use of tobacco within 50 feet was made to the Board of Health, County Commissioners or property owner for ALL facilities with a response from the Board of Health, County Commissioners or property owner.*
- B. The Board of Health needs to decide how they intend to address this standard.
  - 1. If you decide to pursue the restriction of tobacco use within 50 feet, there is a process that needs to be followed.
  - 2. Basically the Board of Health would need to approve a rule and then send it to the Board of County Commissioners for approval before it could go into effect.
  - 3. I have included in the packet some information on tobacco use and laws about tobacco use.

### **IV. Miscellaneous Informational Items**

- A. Environmental Health Statistics
- B. Personal Health Statistics
- C. Pocket Guide to Statistics for Caswell County
- D. Certificate of Completion for QI 101

**CASWELL COUNTY HEALTH DEPARTMENT (FY 2013-2014)**

		<b>Budget</b>	<b>Actual YTD</b>	<b>Balance</b>	<b>YTD = 16.67%</b>
<b>SALARY &amp; BENEFITS SUBTOTAL</b>		<b>2,090,999.00</b>	<b>309,550.27</b>	<b>1,781,448.73</b>	<b>14.80%</b>
Board Expenses	120	0.00	0.00	0.00	0.00%
Salary	121	1,571,976.00	238,259.68	1,333,716.32	15.16%
Call	122	44,005.00	6,362.00	37,643.00	14.46%
Longevity	127	22,295.00	0.00	22,295.00	0.00%
SS / FICA	181	125,580.00	18,004.81	107,575.19	14.34%
Retirement	182	114,114.00	16,451.96	97,662.04	14.42%
Health Insurance	183	213,029.00	30,471.82	182,557.18	14.30%
<b>OPERATIONAL EXPENSE SUBTOTAL</b>		<b>1,011,893.00</b>	<b>127,005.90</b>	<b>884,887.10</b>	<b>12.55%</b>
Contracted Services	199	503,331.00	55,558.51	447,772.49	11.04%
Food & Provisions	220	455.00	166.57	288.43	36.61%
Program Supplies	230	34,869.00	1,346.49	33,522.51	3.86%
Pharmaceuticals	238	36,063.00	1,820.53	34,242.47	5.05%
HH/CAP Med Supplies	239	188,000.00	30,211.22	157,788.78	16.07%
Office Supplies	260	16,501.00	2,534.49	13,966.51	15.36%
Small Tools & Equip.	295	37,100.00	2,504.78	34,595.22	6.75%
Mileage	311	107,226.00	8,741.25	98,484.75	8.15%
Travel Subsistence	312	5,083.00	876.17	4,206.83	17.24%
Telephone	321	11,960.00	1,099.07	10,860.93	9.19%
Postage	325	4,807.00	242.71	4,564.29	5.05%
Printing	340	1,670.00	513.75	1,156.25	30.76%
Maint & Repair	352	8,000.00	927.00	7,073.00	11.59%
Advertising	370	1,642.00	147.89	1,494.11	9.01%
Laundry	392	1,381.00	191.34	1,189.66	13.86%
Training	395	10,210.00	755.50	9,454.50	7.40%
Rental of Copier	431	9,500.00	1,272.08	8,227.92	13.39%
Rental of Post Meter	432	850.00	0.00	850.00	0.00%
Ins & Bonding	450	4,895.00	4,283.55	611.45	87.51%
Dues, Subsc. & Pub.	491	18,350.00	13,813.00	4,537.00	75.28%
Capital Outlay	500	10,000.00	0.00	10,000.00	0.00%
<b>TOTAL EXPENSES</b>		<b>3,102,892.00</b>	<b>436,556.17</b>	<b>2,666,335.83</b>	<b>14.07%</b>
<b>TOTAL REVENUE</b>		<b>3,102,892.00</b>	<b>302,537.99</b>	<b>2,800,354.01</b>	<b>9.75%</b>
<b>STATE SUBTOTAL</b>		<b>626,602.00</b>	<b>22,747.65</b>	<b>603,854.35</b>	<b>3.63%</b>
(101) COUNTY APPROP		371,576.00	67,758.31	303,817.69	18.24%
(103) UR FUND BAL		96,042.00	20,221.14	75,820.86	21.05%
(102) WCH FUND BAL		134,923.00	44,234.50	90,688.50	32.78%
(102) PPC FUND BAL		55,081.00	12,829.56	42,251.44	23.29%
<b>OTHER SUBTOTAL</b>		<b>657,622.00</b>	<b>145,043.51</b>	<b>512,578.49</b>	<b>22.06%</b>
(102) MCD - REGULAR		973,583.00	17,292.58	956,290.42	1.78%
(102) MCD - SETTLEMENT		0.00	0.00	0.00	0.00%
(103) MCR - REGULAR		704,401.00	92,754.63	611,646.37	13.17%
(103) MCR - HMO		57,437.00	9,276.53	48,160.47	16.15%
(103) PRIVATE INS		15,047.00	5,770.97	9,276.03	38.35%
(103) DIRECT FEES		68,200.00	9,652.12	58,547.88	14.15%
<b>EARNED SUBTOTAL</b>		<b>1,818,668.00</b>	<b>134,746.83</b>	<b>1,683,921.17</b>	<b>7.41%</b>
<b>BALANCE</b>		<b>0.00</b>	<b>-134,018.18</b>		



**CASWELL COUNTY BUDGET AMENDMENT # \_\_\_\_\_**  
**Health Department Amendment # 1**

**Be it ordained,** the FY 2013-2014 Annual Budget Ordinance is hereby amended as follows:

**PUBLIC HEALTH - 5110**

<b>Expenditure Line</b>	<b>Account Code</b>	<b>Increase / (Decrease)</b>	<b>Amended Budget</b>
Salary 121	100.5110.121.000	(\$3,021.00)	\$1,571,976.00
SS / FICA 181	100.5110.181.000	\$11.00	\$125,580.00
Retirement 182	100.5110.182.000	\$24.00	\$114,114.00
Health Insurance 183	100.5110.183.000	\$21.00	\$213,029.00
Contracted Services 199	100.5110.199.000	\$50.00	\$503,331.00
Food & Provisions 220	100.5110.220.000	\$105.00	\$455.00
Pharmaceuticals 238	100.5110.238.000	\$155.00	\$36,063.00
Mileage 311	100.5110.311.000	\$35.00	\$107,226.00
Travel Subsistence 312	100.5110.312.000	(\$67.00)	\$5,083.00
Postage 325	100.5110.325.000	(\$269.00)	\$4,807.00
Printing 340	100.5110.340.000	\$194.00	\$1,670.00
Advertising 370	100.5110.370.000	(\$58.00)	\$1,642.00
Laundry 392	100.5110.392.000	\$1.00	\$1,381.00
Training 395	100.5110.395.000	(\$1.00)	\$10,210.00
Ins & Bonding 450	100.5110.450.000	(\$105.00)	\$4,895.00
		<b>(\$2,925.00)</b>	

<b>Revenue Lines</b>	<b>Account Code</b>	<b>Increase / (Decrease)</b>	<b>Amended Budget</b>
State - Public Health	100.3510.360.000	(\$2,925.00)	\$626,602.00
		<b>(\$2,925.00)</b>	

**Justification:**

Move funds between lines to cover expenses and reduce state funds in Maternal Health and Family Planning.

That all Ordinances or portions of Ordinances in conflict are hereby repealed.

\_\_\_\_\_  
 Approved by Health Director

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Approved by Board of Health

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Paula Seamster, Clerk to the Board

\_\_\_\_\_  
 Date

**Approved by the Caswell County Board of Commissioners**

# Understanding Local Authority and Benefits to Regulate Smoking

A Presentation for Local Governments

February 2011



## What G.S.130A-498 Means for Local Government

- Expands local governments' authority to regulate smoking
- Clear authority now exists for regulating smoking on government owned and/or occupied grounds, and for certain enclosed public places.
- Effective January 2, 2010.

## The Benefits of Being Smoke-Free

- Reduce harmful health effects of second-hand smoke exposure
- Reduce costs of on-the-job tobacco use
- Improve health, morale and productivity
- Provide a cleaner, healthier work setting

North Carolina Prevention Partners-Quit Now NC!  
Tobacco Use and Quitting Facts, accessed Sept 12,  
2007 at <http://www.quitnownc.org/>



## Why address exposure to Secondhand Smoke?



# Secondhand Smoke: Silent Killer

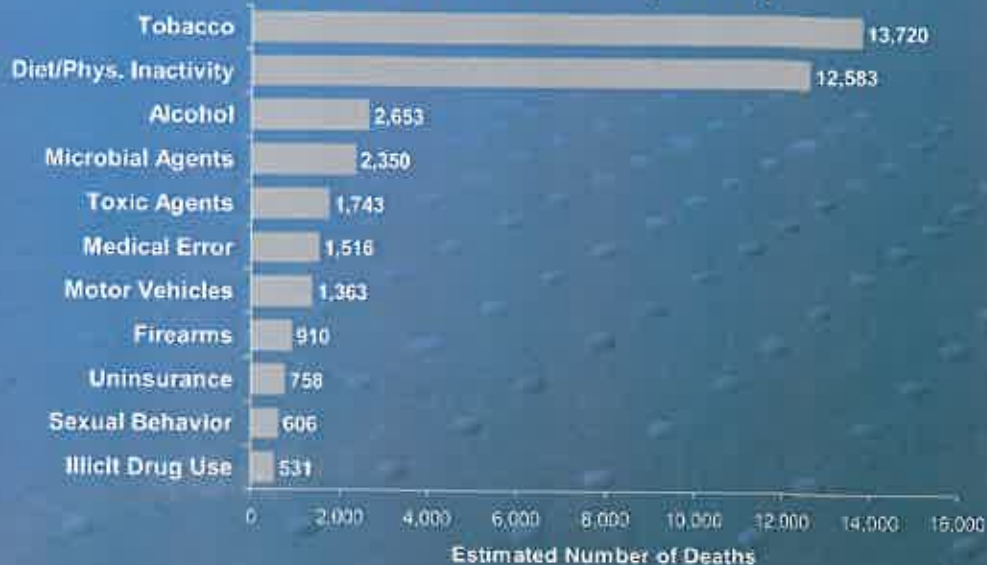
Secondhand smoke kills an estimated **50,000** non-smokers every year:

- **3,000** adult nonsmokers from lung cancer,
- approximately **46,000** from coronary heart disease,
- and an estimated **430** newborns from SIDS (sudden infant death syndrome).

In addition, secondhand smoke causes other respiratory problems in nonsmokers such as coughing, phlegm, and reduced lung function. According to the CDC's National Health Interview Survey in 2000, **more than 80 percent** of the respondents aged 18 years or older believe that secondhand smoke is harmful and nonsmokers should be protected in their workplaces.

The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General, U.S. Department of Health and Human Services, October 2003

## Estimated Preventable Causes of Death in North Carolina (2007)



Source: North Carolina State Center for Health Statistics (NC SCHS), Health Profile of North Carolinians, 2009 Update - May 2009  
North Carolina Department of Health and Human Services

## Key Findings from the Surgeon General's Secondhand Smoke Report (2006)

- **Secondhand smoke (SHS) causes premature death and disease in children and adults who do not smoke**
- **Exposure of adults to SHS causes immediate adverse effects** on the cardiovascular system and causes coronary heart disease and lung cancer.
- Children exposed to SHS are at an increased risk for SIDS, acute respiratory infection, ear problems and asthma.

The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General, U.S. Department of Health and Human Services, October 2006.

## Outdoor Tobacco Smoke (OTS)

Studies are now exploring the risks of exposure to secondhand smoke in outdoor areas.

- OTS can present a nuisance or hazard under certain conditions, and people may receive significant exposure in situations such as:
  - Sitting with or next to an active smoker at an outdoor dining area or on a park bench
  - Standing near an active smoker outside a building
  - Children accompanying a smoking parent or guardian

Klepeis, Ott and Switzer. Real-time measurement of outdoor tobacco-smoke particles. *J. Air & Waste Manage. Assoc.* 57:522-531, 2007

Klepeis, et al. Outdoor air pollution in close proximity to a continuous point source. *Atmospheric Environment* 43 (2009) 3155-3167, 2009



# The Cost of Smoking

- Smokers cost more than nonsmokers due to:
  - Absenteeism
  - Lost productivity
  - Health insurance and life insurance costs and claims
  - Worker's compensation payments
  - Accidents and fires
  - Property damage
  - Smoke pollution
  - Illness and discomfort among nonsmokers exposed to passive smoke
  - More frequent cleaning and maintenance

North Carolina Prevention Partners: Quit Now NCI Tobacco Use and Quitting Facts, accessed Sept 12, 2007 at <http://www.quitnownc.org>

# The Cost of Smoking

- In North Carolina:
  - Total health care costs from smoking: **\$2.46 billion**
  - Total losses in productivity caused by smoking: **\$3.5 billion**

Campaign for Tobacco-Free Kids: "The Toll of Tobacco in North Carolina" Fact Sheet accessed July 10, 2010 at <http://www.tobaccofreekids.org/reports/settlements/all.php?StateID=NC>

# The Cost of SHS

Secondhand smoke results in **\$288.8 million** in medical costs in North Carolina

- **\$76 million** due to Low Birth Weight babies
- **\$27 million** due to asthma (age birth to 17)
- **\$32 million** due to lung cancer
- **\$132 million** due to MI and other heart diseases

North Carolina's Secondhand Smoke Healthcare Cost Burden, BCBSC Clinical Informatics Department, 2009

Who may pass local government regulations?



*"Any local political subdivision of this State, any airport authority, or any authority or body created by any joint resolution, ordinance, or rules of any such entity."*

- County Commissioners
  - City/Town Council
  - Boards of Health / Public Health Authorities \*\*
  - Airport Authorities
- \*\*One unique characteristic of the smoke-free law is that it requires boards of county commissioners to adopt an ordinance approving any smoking rule adopted by a local board of health after July 1, 2009. Local boards of health are not required to have this type of approval for any other types of rules that they adopt.

## Process for Passing Ordinances, Rules, and Policies per G.S 130A-498

### **Cities, Towns, and Villages:**

- Clear authority for municipal regulations that cover government owned or occupied buildings, vehicles and grounds as well as public places in their own incorporated areas
- Do not need any additional approval from a Board of County Commissioners

## Process for Passing Ordinances, Rules, and Policies per G.S 130A-498

### County Government:

- Clear authority for Board of County Commissioners ordinance that covers government owned or occupied buildings, vehicles and grounds as well as public places in the unincorporated areas
- Municipalities within the County may choose to adopt that ordinance within their boundaries
- Municipalities are not required to adopt the ordinance, and may withdraw permitting the ordinance at a future time

## Process for Passing Ordinances, Rules, and Policies per G.S 130A-498

### Boards of Health:

- Clear authority for board of health rules that covers local government owned or occupied buildings, vehicles and grounds as well as public places in the entire county, including municipalities
- Once a Board of County Commissioners approves such a rule through the adoption of an ordinance, it's the North Carolina Division of Public Health's position that the rule or policy shall apply to the county and all municipalities within the county



# What areas may be covered by a local ordinance?

## **Local Government Buildings**

"A building owned, leased as lessor, or the area leased as lessee and occupied by a local government."

Can Include: Health Department Buildings, Courthouses, Police Departments, County Libraries, etc.

## **Local Government Grounds**

"An unenclosed area owned, leased or occupied by . . . local government."

Can Include: Grounds and Parking Lots next to City or County Government Buildings, Parks, Bus Stops, etc.

- **Local Government Vehicles**

"A passenger-carrying vehicle owned, leased, or otherwise controlled by local government and assigned permanently or temporarily by local government to local government employees, agencies, institutions, or facilities for official government business."

Can include: County or Municipal Vehicles

- **Public Places**

"An enclosed area to which the public is invited or in which the public is permitted."

Can include: Convenience Stores, Retail Stores, Bowling Alleys, etc.

## What areas may NOT be covered by a local ordinance?

- Private Residence
- Private Vehicle
- Tobacco Shop
- All Premises, Facilities and Vehicles owned, operated or leased by any Tobacco Products Processor or Manufacturer, or any tobacco leaf grower, processor, or dealer
- Cigar Bar
- Private Club
- Designated Smoking Guest Room in a Lodging Establishment
- Motion Picture, television, theater, or other live production set



## Further Information or Assistance

- Jim D. Martin, MS, Director of Policy and Programs; (919) 707-5404, [jim.martin@dhhs.nc.gov](mailto:jim.martin@dhhs.nc.gov)
- Elisabeth K. Constandy, MS, Director of Program Development; (910)790-6007, [elisabeth.constandy@dhhs.nc.gov](mailto:elisabeth.constandy@dhhs.nc.gov)
- Elleveve Donahue, JD, Attorney, (919) 707-5406, [elleveve.donahue@dhhs.nc.gov](mailto:elleveve.donahue@dhhs.nc.gov)

## **Health Effects of Secondhand Smoke Exposure**

### **Surgeon General's Report Overview**

In June 2006, the Centers for Disease Control and Prevention issued "A Report of the Surgeon General: The Health Consequences of Involuntary Exposure to Tobacco Smoke." The last comprehensive review of this evidence by the Department of Health and Human Services (DHHS) was in the 1986 Surgeon General's report; "The Health Consequences of Involuntary Smoking." This report updated the evidence of the harmful effects of involuntary exposure to tobacco smoke. <sup>i ii</sup>

<http://www.surgeongeneral.gov/library/secondhandsmoke/report/>

### **Six Major Conclusions of the 2006 Surgeon General's Report**

1. Secondhand smoke causes premature death and disease in children and in adults who do not smoke.
2. Children exposed to secondhand smoke are at an increased risk for sudden infant death syndrome (SIDS), acute respiratory infections, ear problems, and more severe asthma. Smoking by parents causes respiratory symptoms and slows lung growth in their children.
3. Exposure of adults to secondhand smoke has immediate adverse effects on the cardiovascular system and causes coronary heart disease and lung cancer.
4. The scientific evidence indicates that there is **no safe level** of exposure to secondhand smoke.
5. Millions of Americans, both adults and children, are still exposed to secondhand smoke in their homes and workplaces despite substantial progress in tobacco control.
6. Eliminating smoking in indoor spaces fully protects nonsmokers from exposure to secondhand smoke. Separating smokers from nonsmokers, cleaning the air, and ventilating buildings cannot eliminate exposures of nonsmokers to secondhand smoke.

### **Health Effects Brief <sup>iii</sup>**

#### **Lung cancer:**

- Secondhand smoke is similar to the mainstream smoke inhaled by smokers in that it contains harmful chemicals including formaldehyde, cyanide, carbon monoxide, ammonia, and nicotine.
- Secondhand smoke is a known human carcinogen <sup>iv</sup> and contains more than 50 chemicals that can cause cancer.
- Concentrations of many of these chemicals are potentially higher in secondhand smoke than in the smoke inhaled by smokers.

#### **Respiratory effects:**

- Secondhand smoke contains many chemicals that can quickly irritate and damage the lining of the airways.
- Even brief exposure can trigger respiratory symptoms, including coughing, phlegm, wheezing, and breathlessness.
- Brief exposure to secondhand smoke can trigger an asthma attack in children and adults with asthma.
- People who already have asthma or other respiratory conditions are at especially high risk for being affected by secondhand smoke, and should take special precautions to avoid secondhand smoke exposure.

### **Heart disease:**

- Exposure to SHS can trigger a heart attack in someone with heart disease or risk factors for heart disease. The Centers for Disease Control and Prevention (CDC) states, "...all patients at risk of coronary heart disease or with known coronary artery disease should be advised to avoid all indoor environments that permit smoking".
- A study in Helena, Montana showed a 43% decrease in admissions for heart attack to the local hospital after a city-wide smoking ban was implemented. Admissions rates for heart attack increased to previous levels when the ban was rescinded, suggesting exposure to SHS may cause heart attacks. Other studies have shown similar results.<sup>v</sup>
- A University of California, San Diego study shows that "California's 40 year-long tobacco control program has resulted in lung cancer rates that are nearly **25 percent lower** than other states."<sup>vi</sup>
- Breathing secondhand smoke for even a short time can have immediate adverse effects on the cardiovascular system, interfering with the normal functioning of the heart, blood, and vascular systems in ways that increase the risk of heart attack.
- Even a short time in a smoky room can cause your blood platelets to become stickier, damage the lining of blood vessels, decrease coronary flow velocity reserves, and reduce heart rate variability.
- People who already have heart disease are at especially high risk of suffering adverse effects from breathing secondhand smoke, and should take special precautions to avoid even brief exposure.

### **SIDS (sudden infant death syndrome) and other health consequences in infants and children:**

- Smoking by pregnant women has been known for some time to cause SIDS.
- Infants who are exposed to secondhand smoke after birth are at a greater risk of SIDS.
- Children exposed to secondhand smoke are at an increased risk for lower respiratory infections such as pneumonia and bronchitis.
- Secondhand smoke exposure increases the prevalence of fluid in the middle ear, a sign of chronic middle ear disease.
- Secondhand smoke exposure increases the frequency of episodes and severity of symptoms in asthmatic children.
- Secondhand smoke exposure is a risk factor for new cases of asthma in children who have not previously displayed symptoms.
- Pregnant women who are exposed to secondhand smoke are more likely to have lower birth weight babies.

### **No Safe Levels of Exposure**

#### **Separating smokers from nonsmokers, cleaning the air, and ventilating buildings cannot eliminate secondhand smoke exposure.**

- The American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE), the preeminent U.S. standard-setting body on ventilation issues, has concluded that ventilation technology cannot be relied on to completely control health risks from secondhand smoke exposure.<sup>vii</sup>
- Conventional air cleaning systems can remove large particles, but not the smaller particles or the gases found in secondhand smoke.
- Operation of a heating, ventilating, and air conditioning system can distribute secondhand smoke throughout a building.

*Information contained on this highlight sheet has been taken directly from *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. For more information, please refer to the *Resources and How to Protect Yourself and Your Loved Ones from Secondhand Smoke* highlight sheets. Additional highlight sheets are also available at [www.cdc.gov/tobacco](http://www.cdc.gov/tobacco).*



## Smoking in Public Places: Recent Changes in State Law

Aimee Wall

On May 19, 2009, Governor Perdue signed legislation that makes significant changes to the state laws governing smoking in public places.<sup>1</sup> The law creates new statewide prohibitions and also expands local authority to adopt local smoking laws. This bulletin is divided into three sections. The first section provides some background and history on the evolution of smoking laws in North Carolina. The second section discusses the smoking prohibitions that apply statewide both now and after the new law goes into effect. The third section focuses on the expanded authority of local governments to regulate smoking within their jurisdictions. The appendix includes some of the key definitions found in the new law.

### Background

In 1993, the legislature enacted a smoking law that, subject to some exceptions, *required* state and local government buildings to allow smoking in government buildings.<sup>2</sup> It also severely restricted the authority of local governments to adopt ordinances, board of health rules or policies regulating smoking within their jurisdictions.<sup>3</sup> For example, local governments were required to allow smoking in local government buildings, unless it was physically impracticable to do so, and they were not permitted to regulate smoking in restaurants, bars and other public places. Over time, the 1993 law was incrementally amended to allow local regulation of smoking in a limited number of locations, such as buildings housing local departments of social services and the grounds surrounding those buildings.<sup>4</sup>

In 2006, the tide started to turn across the country and in North Carolina on the issue of smoking regulation. In June, the U.S. Surgeon General issued a report that concluded “there is no risk-free level

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1. S.L. 2009-27.

2. G.S. Chapter 143, Article 64.

3. G.S. 143-601.

4. S.L. 2005-19; S.L. 2005-168.



of exposure to secondhand smoke.”<sup>5</sup> In July, the N.C. General Assembly enacted a law prohibiting smoking in the legislative buildings.<sup>6</sup> Then beginning early in the 2007 term, the legislature considered a flurry of bills addressing exposure to secondhand smoke and regulation of smoking.<sup>7</sup> It considered but ultimately rejected legislation that would have prohibited smoking in many public places and workplaces.<sup>8</sup> It did, however, pass legislation prohibiting smoking in state government buildings<sup>9</sup> and long-term care facilities<sup>10</sup> and authorizing local governments to regulate smoking in local government buildings.<sup>11</sup> It also passed legislation directing local boards of education to adopt policies prohibiting tobacco use on elementary and secondary school property and at school events.<sup>12</sup>

In 2008, the General Assembly enacted legislation to prohibit smoking in state vehicles and to allow local governments to regulate smoking in their vehicles.<sup>13</sup> It also added new language to the laws governing community colleges to expressly authorize the boards of trustees of community colleges to adopt, implement and enforce a written policy prohibiting tobacco use on college property and at college-sponsored events.<sup>14</sup>

The following discussion offers a legal analysis that integrates these historical changes with the new law that passed in the 2009 session. The first section addresses the smoking laws that apply statewide. The second section addresses local governments’ authority to impose additional regulations, above and beyond statewide prohibitions.

## Statewide Prohibitions

### Is smoking currently prohibited anywhere under state law?

Yes. Smoking is currently prohibited in state government buildings, state vehicles, schools, prisons, and long-term care facilities. These prohibitions remain in place after the new law goes into effect January 2, 2010.

*Inside state government buildings:*<sup>15</sup> Smoking is currently prohibited inside state government buildings. A “state government building” is a building owned, leased as lessor (i.e., landlord), or the area leased as lessee (i.e., tenant) and occupied by a political unit for the State of North Carolina, including all agencies of the executive, judicial, and legislative branches of government.

- Exception: Smoking is permitted inside the area of a state government building that is being used for medical or scientific research to the extent that smoking is an integral part of the research.

5. U.S. Department of Health and Human Services, *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General* 11 (June 27, 2006), available at <http://www.surgeongeneral.gov/library/secondhandsmoke/report/> (last visited May 18, 2009).

6. S.L. 2006-176 (adding new G.S. 143-597).

7. See Aimee N. Wall, *Regulation of Smoking: Update on Recent State Legislation*, HEALTH LAW BULLETIN No. 87 (Sept. 2007).

8. H 259.

9. S.L. 2007-193, as amended by S.L. 2007-484 (sec. 31.7).

10. S.L. 2007-459.

11. S.L. 2007-193, as amended by S.L. 2007-484 (sec. 31.7).

12. S.L. 2007-193.

13. S.L. 2008-149.

14. S.L. 2008-95 (adding new G.S. 115D-20.1).

15. G.S. 130A-493.

- **Administration:** The individual in charge of the building must post no smoking signs in conspicuous areas of the building. State psychiatric hospitals must also (1) direct smokers to extinguish cigarettes, cigars and other lighted items and (2) notify individuals when they are admitted that smoking is prohibited and obtain the individual's signature acknowledging receipt of the notice.<sup>16</sup>
- **Enforcement:** Unlike other public health law violations, a violation of this law is not a misdemeanor. This prohibition could be enforced administratively against state employees (e.g., personnel action). Alternatively, the state could pursue an injunction against a smoker pursuant to GS 130A-18.

*Inside state vehicles:*<sup>17</sup> Smoking is currently prohibited inside state vehicles. A "state vehicle" is a passenger-carrying vehicle owned, leased, or otherwise controlled by the State and assigned permanently or temporarily to a State employee or State agency or institution for official State business.

- **Administration:** One or more no smoking signs must be placed in conspicuous areas of the vehicle. No sign is required, however, if the vehicle is used for undercover law enforcement operations.
- **Enforcement:** Unlike other public health law violations, a violation of this law is not a misdemeanor. This prohibition could be enforced administratively against state employees (e.g., personnel action). Alternatively, the state could pursue an injunction against a smoker pursuant to GS 130A-18.

*Elementary and secondary schools:*<sup>18</sup> Local boards of education are required to have policies in place prohibiting the use of tobacco products (which includes smoking) (1) in school buildings, (2) in school facilities, (3) on school campuses, (4) in or on any property owned by the local school administrative unit, and (5) at school-sponsored events at other locations when in the presence of students or school personnel.

- **Exception:** The policy may allow for the use of tobacco products in instructional or research activities if the activity is (1) conducted or supervised by faculty and (2) does not include smoking, chewing or otherwise ingesting the product.
- **Administration:** The policy must provide for posting of appropriate signs and adequate notice to students, parents, the public and school personnel.
- **Enforcement:** The policy must include requirements that school personnel enforce the prohibition.

*Prisons:*<sup>19</sup> The use of tobacco products is currently prohibited inside state correctional facilities.

- **Exception:** Tobacco products may be used for authorized religious purposes.

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16. After the new law goes into effect, people in charge of all state government buildings – not just psychiatric hospitals – will need to direct smokers to extinguish cigarettes and other lighted items. The requirement to provide notice will still only apply to psychiatric hospitals. S.L. 2009-27 (amending G.S. 130A-493(c)).

17. G.S. 130A-493.

18. G.S. 115C-407.

19. G.S. 148-23.1. Legislation is pending that, if enacted, would expand this law to prohibit the possession of any tobacco products on the premises of a correctional facility (other than tobacco products used for religious purposes). See S 167 (approved by the Senate on May 11, 2009).

- Administration: The NC Department of Correction has adopted policies and procedures implementing this prohibition.<sup>20</sup>
- Enforcement: Inmates and employees violating the law may be subject to disciplinary measures.<sup>21</sup> Visitors violating the law may be subject to removal from the facility and the loss of visitation privileges.

*Long-term care facilities:*<sup>22</sup> Smoking is currently prohibited in long-term care facilities, which includes nursing homes, adult care homes, rest homes, and facilities licensed under Chapter 122C to provide services for mental health, developmental disabilities or substance abuse.<sup>23</sup> Home care agencies are also required to prohibit their employees from smoking in a patient's home.

- Administration: The facility must (1) conspicuously post no smoking signs, (2) direct smokers to extinguish products, and (3) notify individuals when they are admitted that smoking is prohibited and obtain the individual's signature acknowledging receipt of the notice.
- Enforcement: The NC Department of Health and Human Services (DHHS) is authorized to fine a facility up to \$200 for each violation.

#### **How does the new legislation change state law? Where will smoking be prohibited in the future?**

After January 2, 2010, the statewide prohibitions on smoking identified above will remain in effect. In addition, smoking will be prohibited in (1) restaurants, (2) bars, and (3) lodging establishments that prepare and serve food and drink.

A "restaurant" is defined as a food or lodging establishment that prepares and serves food or drink and is regulated by the state's sanitation laws and regulations. This definition encompasses all restaurants that are inspected and permitted by local health departments and many of the lodging establishments across the state.<sup>24</sup> While it may seem a little awkward to include lodging establishments, such as hotels, motels, bed and breakfasts, and inns, within the definition of "restaurant," the sanitation laws enforced by state and local public health officials often group together all types of establishments that prepare or serve food or drink for human consumption.<sup>25</sup>

A "bar" is an establishment that holds a state permit authorizing it to sell malt beverages (e.g., beer), wine, or mixed drinks on its premises. Under this definition, several different types of venues could be considered bars, including restaurants, hotels, clubs, theaters and convention centers.

There are three exceptions to the prohibition on smoking in restaurants, lodging establishments and bars: (1) smoking guest rooms in lodging establishments, (2) cigar bars, and (3) private clubs.

- Up to 20% of the guest rooms in a lodging establishment may be designated as smoking guest rooms.

20. North Carolina Department of Correction, Division of Prisons, Policies and Procedures, Ch. F, § .2500 (April 10, 2006).

21. See Department of Correction, Rules and Policies Governing the Management and Conduct of Inmates under the Control of the Division of Prisons (October 2007), available at <http://www.doc.state.nc.us/Publications/inmate%20rule%20book.pdf> (last visited May 19, 2009).

22. See S.L. 2007-459 (amending G.S. §§ 131D-4.4; 131E-114.3, 122C-6, 131E-143).

23. Note that this prohibition does not apply to state psychiatric hospitals. Smoking is prohibited in those facilities pursuant to the general prohibition on smoking in state government buildings.

24. There are some types of food and lodging establishments that are exempt from the state sanitation laws and therefore would likely be exempt from the smoking prohibition. See G.S. 130A-250.

25. See, e.g., G.S. Chapter 130A, Article 8, Part 6 (Regulation of Food and Lodging Facilities).



- A cigar bar may allow smoking if smoke does not migrate into an enclosed area where smoking is otherwise prohibited under state law. A cigar bar is a bar that (1) generates at least 60% of its quarterly gross revenue from the sale of alcoholic beverages, (2) generates at least 25% of its quarterly gross revenue from the sale of cigars,<sup>26</sup> (3) has a humidor<sup>27</sup> on the premises, and (4) does not allow individuals under the age of 21 to enter the premises. Cigar bars seeking to fall within the exception must report revenue to the Department of Health and Human Services on a quarterly basis. If a cigar bar begins operation after July 1, 2009, it must be in a freestanding structure occupied only by the bar.
- A private club may allow smoking. A private club defined as a country club or an organization that (1) maintains selective members, (2) is operated by the membership, (3) does not provide food or lodging for pay to anyone who is not a member or a member's guest, and (4) is a nonprofit corporation.<sup>28</sup>

### *Administration*

To implement this new state law, the person who manages, operates or controls the restaurant or bar must take the following three steps: (1) conspicuously post no smoking signs, (2) remove all indoor ashtrays, and (3) direct a person who is smoking to extinguish the product.

### *Enforcement*

Enforcement will vary depending upon who is violating the law. If a smoker continues to smoke after being notified either orally or in writing to stop smoking by the person in charge of the facility, the smoker may be cited by a law enforcement official for an infraction. The punishment for such an infraction may only be a fine of not more than \$50. The smoker may not be assessed court costs.

If a person who manages, operates, or controls a restaurant, bar or lodging establishment fails to comply with the new law or with any rules adopted by the Commission for Public Health, the local health director has the authority to assess an administrative penalty, which is a monetary fine, of up to \$200. The fine may be assessed only after the person has been given written notice twice. The person may appeal the fine to the local board of health and ultimately through the court system.<sup>29</sup>

There are two other enforcement tools that are ordinarily available in the public health laws – a civil injunction<sup>30</sup> and a criminal misdemeanor.<sup>31</sup> The new law clearly states that no person may be charged with a misdemeanor for violating the prohibition on smoking in restaurants, bars or lodging establishments. It would be possible, however, to use an injunction as an enforcement tool. For example, if a person in charge of a restaurant refused to comply with the statewide law and simply chose to pay the \$200 fine every day, state or local public health officials could ask a court to issue an order directing the person's compliance. Failure to comply with the court order could then result in a finding of contempt by the judge.<sup>32</sup>

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26. Revenue generated from other tobacco sales, including cigarette vending machines, does not count toward the 25% minimum.

27. A humidor is a special box or room with constant humidity designed to store cigars or pipe tobacco.

28. The definition of private club is somewhat ambiguous. It is not clear whether a country club must satisfy the four criteria identified in the definition. In addition, the term "country club" is not defined. S.L. 2009-27 (amending G.S. 130A-492).

29. G.S. 130A-24.

30. G.S. 130A-18.

31. G.S. 130A-25.

32. See G.S. Chapter 5A, Article 2 (civil contempt).

## Local Government Authority

### Do local governments currently have the authority to regulate smoking within their jurisdictions?

Yes. Under current law, local governments<sup>33</sup> have limited authority to regulate smoking within their jurisdictions. They have the authority to adopt an ordinance, law, or rule restricting smoking in the following places:

- Buildings owned, leased as lessor, or the area leased as lessee and occupied by the local government;
- Buildings and grounds (up to 50 feet) of local health departments and departments of social services;
- Any place on a public transportation vehicle owned or leased by local government and used by the public; and
- Any place in a local vehicle, which is defined a passenger-carrying vehicle owned, leased, or otherwise controlled by local government and assigned permanently or temporarily to local government employees, agencies, institutions, or facilities for official local government business.<sup>34</sup>

### When the new law goes into effect, how will the authority of local governments change?

Effective January 2, 2010, local governments will have expanded authority to regulate smoking in public places. They will retain the authority to regulate smoking in local government buildings and local vehicles. They will have expanded authority to regulate smoking (1) on local government grounds and (2) in public places. A local law may not change the state law to allow smoking in restaurants, bars and lodging establishments where smoking is prohibited under the state law, but it could prohibit smoking in more places.

The expanded authority to regulate smoking on local government grounds is fairly straightforward. Local governments will have the authority to regulate all unenclosed areas owned, leased, or occupied by the local government. Previously, local governments were only allowed to regulate smoking on the grounds of buildings housing local health departments or departments of social services. With this change, for example, a city may be able to regulate smoking in the outdoor area surrounding city hall or a county may be able to prohibit smoking in a county-owned park.

The new authority to regulate smoking in public places is a bit more complex. The term “public place” is defined as an enclosed area to which the public is invited or in which the public is permitted. An area is “enclosed” if it has (1) a roof or other overhead covering of any kind and (2) walls or side coverings of any kind on all sides or all sides but one (regardless of openings available for entering and leaving the area). For example, a patio with a solid roof but no walls would be considered *unenclosed* but a patio that has a canvas roof and canvas walls on three of its four sides would be considered *enclosed*.

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33. A local government is “a local political subdivision of this State, an airport authority, or an authority or body created by an ordinance, joint resolution, or rules of any such entity.” G.S. 130A-498(c). Note that in the new law, this definition is moved to G.S. 130A-492(5).

34. G.S. 130A-498(b).

There are quite a few exceptions to the authority to regulate smoking in public places. A local government may *not* restrict or prohibit smoking in the following places:

- A private residence, which is a private dwelling that is not a child care facility or a long-term care facility.
- A private vehicle, which is a privately owned vehicle that is not used for commercial or employment purposes.
- A tobacco shop, but only if smoke from the business does not migrate into an enclosed area where smoking is otherwise prohibited under state law. A business will be considered a tobacco shop if (1) its main purpose is to sell tobacco, tobacco products, and accessories for such products, (2) it receives at least 75% of its revenue from such sales, and (3) it does not serve food or alcohol.
- All of the premises, facilities, and vehicles owned, operated or leased by any tobacco products processor or manufacturer, or any tobacco leaf grower, processor or dealer.
- A designated smoking guest room in a lodging establishment. Consistent with the state law, lodging establishments are allowed to designate up to 20% of the guest rooms as smoking rooms.
- A cigar bar, but only if smoke from the bar does not migrate into an enclosed area where smoking is otherwise prohibited under state law. A cigar bar is a bar that (1) generates at least 60% of its quarterly gross revenue from the sale of alcoholic beverages, (2) generates at least 25% of its quarterly gross revenue from the sale of cigars,<sup>35</sup> (3) has a humidor<sup>36</sup> on the premises, and (4) does not allow individuals under the age of 21 to enter the premises. The cigar bars must report revenue to the Department of Health and Human Services on a quarterly basis. If a cigar bar begins operation after July 1, 2009, it must be in a freestanding structure occupied only by the bar.
- A private club, which includes country clubs and any organization that (1) maintains selective members, (2) is operated by the membership, (3) does not provide food or lodging for pay to anyone who is not a member or a member's guest, and (4) is a nonprofit corporation.
- A motion picture, television, theater, or other live production set. This exemption applies only to the actor or performer portraying the use of tobacco products during the production.

While the list of exceptions to this new authority is quite long, there are still many opportunities for local regulation of smoking in public places. Some local governments have considered, for example, regulating or prohibiting smoking in enclosed shopping malls, bowling alleys and workplaces. While local governments previously lacked the authority to take action in this area, it is now possible that the debate around these types of policies can take place at the local level.

### Which local government entities will be able to regulate smoking?

The definition of local government is quite broad: "a local political subdivision of this State, an airport authority, or an authority or body created by an ordinance, joint resolution, or rules of any

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35. Revenue generated from other tobacco sales, including cigarette vending machines, does not count toward the 25% minimum.

36. A humidor is a special box or room with constant humidity designed to store cigars or pipe tobacco.



such entity.”<sup>37</sup> Therefore, a variety of different local government entities will be able to take advantage of this new authority. For example,

- A board of county commissioners may adopt an ordinance that regulates smoking in the unincorporated areas of the county. County officials may also adopt a policy (which is not a law) that governs smoking in county-owned buildings located within municipalities.
- The governing board of a municipality (e.g., city council) may adopt an ordinance that regulates smoking within the municipality. The governing board also has the option of adopting a resolution agreeing to be governed by a county ordinance.<sup>38</sup>
- A local board of health may adopt a rule (which is a law) that regulates smoking throughout the entire county, including within all municipalities.<sup>39</sup> If a local board of health adopts a rule after the new state law goes into effect, the health rule will not be effective until the board of county commissioners adopts an ordinance approving the rule.<sup>40</sup>

While cities, counties and boards of health will probably be the primary local bodies taking action in this field, other local government entities, such as airport authorities, will also be able to regulate smoking within their jurisdictions.

### Will more guidance on the new law be available?

The changes made this year to the state’s smoking laws are fairly dramatic. It is likely that many questions related to interpretation and implementation of the law will arise over the next few years. Some of these questions may be answered when the Commission for Public Health issues implementing regulations in the coming months. In addition, the General Assembly could make some technical or clarifying changes to the law. As the need arises, the School of Government will post additional information and materials, such as frequently asked questions, online at [www.ncphlaw.unc.edu](http://www.ncphlaw.unc.edu).<sup>41</sup>

37. S.L. 2009- 27. Section 1 (amending G.S. 130A-492 to incorporate the definition of local government used in G.S. Chapter 130A, Article 64).

38. G.S. 153A-122.

39. G.S. 130A-39(a). There are several variations on the public health service delivery model across the state. Most counties are served by a single county health department and a single county local board of health. Some counties are served by a multi-county district health department and a district board of health. One county is served by a public health authority and a public health authority board (Hertford). One county is served by a hospital authority and a hospital authority board (Cabarrus). One county is served by a human services agency and a human services board, charged with oversight of public health, social services and mental health (Wake). One county is served by a single-county health department but the board of county commissioners serves as the board of health (Mecklenburg). For more discussion of the state’s public health system, see Jill D. Moore, Public Health, Article 41 in *COUNTY AND MUNICIPAL GOVERNMENT* (David M. Lawrence, ed., 2007), available at <http://www.sog.unc.edu/pubs/cmng/cmng41.pdf>.

40. There is some ambiguity in the new law related to the board of health’s authority. S.L. 2009-27 (revising G.S. 130A-498) requires the board of county commissioners to adopt an ordinance approving any board of health rule adopted after July 1, 2009. However, the new law does not go into effect until January 2, 2010. Therefore, there is a window of time between July 1, 2009 and January 2, 2010 during which board of health rules related to smoking may or may not require approval from the board of county commissioners. The law is clear, though, that after January 2, 2010, all board of health rules related to smoking will require approval.

41. Other groups, such as the Tobacco Prevention and Control Branch at the N.C. Department of Health and Human Services and the North Carolina Alliance for Health (an advocacy organization) may also be disseminating guidance material. See, e.g., <http://www.tobaccopreventionandcontrol.ncdhhs.gov/> and <http://www.ncallianceforhealth.org/> (last visited May 21, 2009).

## Appendix

### Key Definitions

**Bar:** An establishment with a state permit to sell malt beverages (e.g., beer) or wine (fortified or unfortified). Definition can encompass a variety of venues such as theaters, hotels and convention centers.

**Cigar bar:** A bar (see definition above) that (1) generates at least 60% of its quarterly gross revenue from the sale of alcoholic beverages, (2) generates at least 25% of its quarterly gross revenue from the sale of cigars,<sup>42</sup> (3) has a humidor on the premises, and (4) does not allow individuals under the age of 21 to enter the premises.

**Enclosed area:** An area with a roof or other overhead covering of any kind and walls or side coverings of any kind, regardless of the presence of openings for entry or exit.

**Local government:** A local political subdivision of the state, an airport authority, or an authority or body created by an ordinance, joint resolution, or rules of any such entity.

**Lodging establishment:** An establishment that provides lodging for pay to the public.

**Private club:** (1) A country club or (2) an organization that maintains selective members, is operated by the membership, does not provide food or lodging for pay to anyone who is not a member or a member's guest, and is either incorporated as a nonprofit corporation under state law or is tax-exempt under federal law.

**Public place:** An enclosed area to which the public is invited or in which the public is permitted.

**Restaurant:** A food and lodging establishment that prepares and serves drink or food as regulated by state's sanitation laws.

**Smoking:** The use or possession of a lighted cigarette, lighted cigar, lighted pipe, or any other lighted tobacco product.

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42. Revenue generated from other tobacco sales, including cigarette vending machines, does not count toward the 25% minimum.

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# ENVIRONMENTAL HEALTH MONTHLY STATISTICAL REPORT

August 2013

Activity Description	#	Comments
<b>FOOD, LODGING, AND INSTITUTIONAL</b>		
Field Visits	18	
Inspections	10	
Permits Issued-New or Revised Business		
Permits Suspended/Revoked-Business Closed		
Food Service Plan Review		
Consultation Contacts	25	
Complaints		
<b>ON SITE WASTE WATER PROGRAM</b>		
Field Visits	51	
Soil/Site Evaluations	7	
Improvement Permits	5	
Construction Authorizations	4	
Operation Permits	10	
Denials	1	
Failing System Evaluations	1	
IP, CA, & OP Permits-Repairs	3	
Existing System Inspections/Authorizations	36	
OSWW Violations Notices	1	
Consultation Contacts	241	
Migrant Housing Inspections		
Pending Applications-Not Addressed		
Complaints	2	
<b>WATER SAMPLES</b>		
Field Visits	12	
Bacteria Samples	9	
Chemical Samples	8	
Petroleum Samples	1	
Pesticide Samples	1	
Nitrate/Nitrite Samples	2	
Consultation Contacts	20	
Migrant Housing Inspections		
<b>WELL PERMITS</b>		
Well Site Field Visits	14	
Number of Permits (New)	4	
Number of Permits(Repair)	4	
Grout Inspections	10	
Well Head Inspections	6	
Well Abandonment Inspections		
Bore Hole Camera Inspections	2	
Consultation Contacts	33	
Complaints		
<b>SWIMMING POOLS</b>		
Permits/Inspections		
<b>OTHER MISCELLANEOUS ACTIVITIES</b>		
Clerical Time (hrs)	44.5	
Phone Contacts (documented)	130	
Office Consults (documented)	28	
File Digitizing (hrs)	8	
Intern Preparation ( Matt Maness)(hrs)	35	
On-Site Program Evaluation / Accred.(days)	2	



# ENVIRONMENTAL HEALTH MONTHLY STATISTICAL REPORT

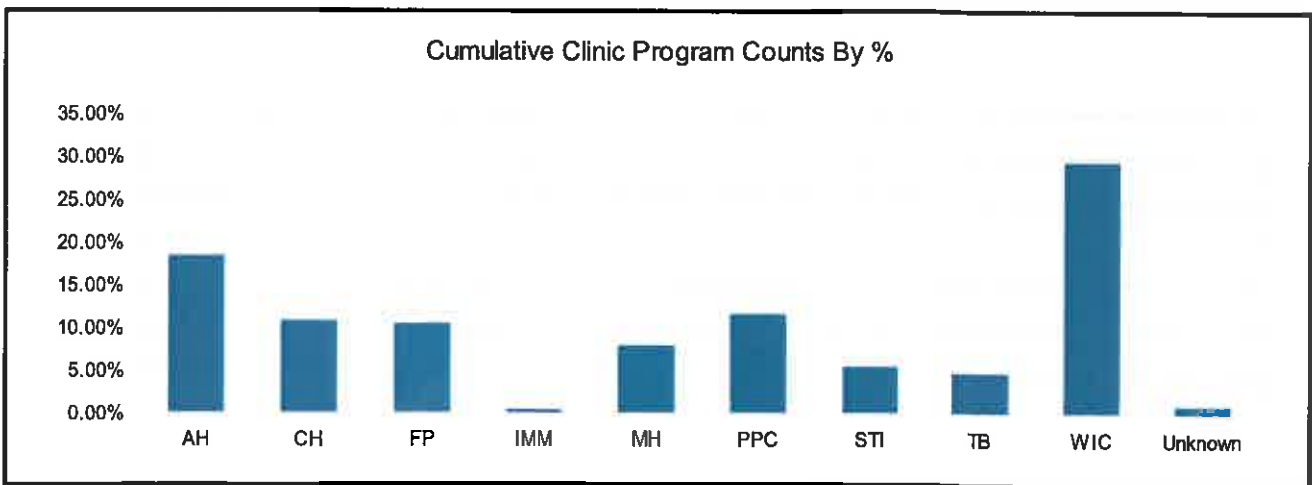
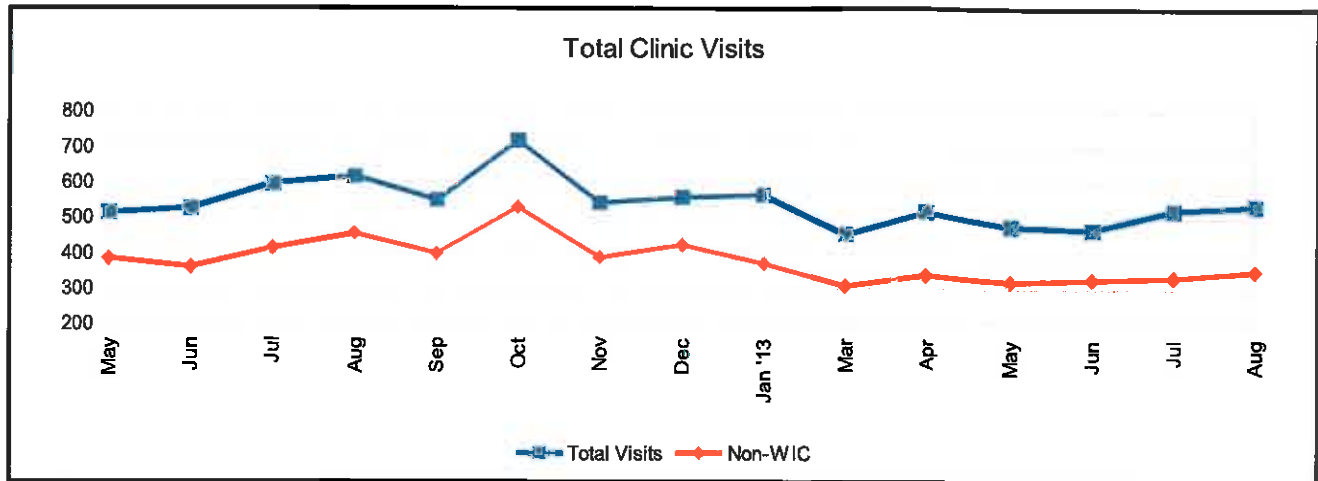
July 2013

Activity Description	#	Comments
<b>FOOD, LODGING, AND INSTITUTIONAL</b>		
Field Visits	20	
Inspections	18	
Permits Issued-New or Revised Business	2	
Permits Suspended/Revoked-Business Closed		
Food Service Plan Review		
Consultation Contacts	22	
Complaints	1	
<b>ON SITE WASTE WATER PROGRAM</b>		
Field Visits	52	
Soil/Site Evaluations	11	3 backhoe pit evaluations
Improvement Permits	6	
Construction Authorizations	7	
Operation Permits	8	
Denials	1	
Failing System Evaluations	2	
IP, CA, & OP Permits-Repairs	3	
Existing System Inspections/Authorizations	9	
OSWW Violations Notices		
Consultation Contacts	58	
Migrant Housing Inspections		
Pending Applications-Not Addressed		
Complaints	2	
<b>WATER SAMPLES</b>		
Field Visits	15	
Bacteria Samples	11	
Chemical Samples	6	
Petroleum Samples	1	
Pesticide Samples	1	
Nitrate/Nitrite Samples	3	
Consultation Contacts	21	
Migrant Housing Inspections		
<b>WELL PERMITS</b>		
Well Site Field Visits	19	
Number of Permits (New)	6	
Number of Permits(Repair)	3	
Grout Inspections	10	
Well Head Inspections	5	
Well Abandonment Inspections		
Bore Hole Camera Inspections	2	
Consultation Contacts	13	
Complaints		
<b>SWIMMING POOLS</b>		
Permits/Inspections		1 Program Evaluation Consultation/Accred.
<b>OTHER MISCELLANEOUS ACTIVITIES</b>		
Clerical Time (hrs)	35.5	
Phone Contacts (documented)	126	
Office Consults (documented)	32	
File Digitizing (hrs)	45	
Centralized Training preparation (hrs)	8	
FLI Program Eval/QA Consult (Will/ staff)(days)	1	



**Caswell County Health Dept Clinic Counts By Program And Month**

Area	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan '13	Mar	Apr	May	Jun	Jul	Aug	Total	%
AH	93	98	90	119	123	179	116	116	83	62	81	85	90	85	85	1706	18.41%
CH	52	49	76	96	69	60	63	71	66	36	35	38	50	56	85	998	10.77%
FP	77	68	70	59	52	67	48	67	29	38	45	52	64	56	44	969	10.46%
IMM	0	1			2	9			4							33	0.36%
MH	36	34	45	53	47	41	38	26	42	41	55	51	47	61	50	731	7.89%
PPC	51	53	61	54	56	96	69	100	102	72	57	54	41	40	46	1070	11.55%
STI	41	31	31	33	21	30	29	28	23	27	25	26	31	30	28	502	5.42%
TB	35	27	41	40	27	45	25	14	21	31	38	13	3	5	12	436	4.70%
WIC	130	165	180	161	151	159	152	135	181	137	179	153	137	183	168	2732	29.48%
Unknown						31	1		13	10	2	4	4	7	18	90	0.97%
																0	0.00%
																0	0.00%
<b>Total Visits</b>	<b>515</b>	<b>526</b>	<b>594</b>	<b>615</b>	<b>548</b>	<b>717</b>	<b>541</b>	<b>557</b>	<b>564</b>	<b>454</b>	<b>517</b>	<b>476</b>	<b>467</b>	<b>523</b>	<b>536</b>	<b>9,267</b>	
<b>Non-WIC</b>	<b>385</b>	<b>361</b>	<b>414</b>	<b>454</b>	<b>397</b>	<b>527</b>	<b>388</b>	<b>422</b>	<b>370</b>	<b>307</b>	<b>336</b>	<b>319</b>	<b>326</b>	<b>333</b>	<b>350</b>	<b>6445</b>	





**Caswell County Health Department Clinic Counts By Zip Code And Month**

Area	Zip	Mar '12	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan '13	Mar	Apr	May	Jun	Jul	Aug	Total	%
Alamance	27201											1							0	0.00%
Ashboro	27203									2		1			1				3	0.03%
Ashboro	27204						1												1	0.01%
Ashboro	27205														1				1	0.01%
Blanch	27212	29	31	32	28	24	20	25	31	28	25	23	20	24	14	27	22	23	426	4.58%
Brown Summit	27214					1		1	1										3	0.03%
Burlington	27215	1	1	2	2	3	1	4	3	3		2	1	2	4	2	1	1	33	0.35%
Burlington	27216	2														1			3	0.03%
Anderson	27217	10	14	16	16	24	29	9	38	14	16	22	14	35	25	20	29	22	353	3.79%
Bynum	27228																	1	1	0.01%
Cedar Falls, NC	27230			1															1	0.01%
Cedar Grove	27231			2															2	0.02%
Denton	27239												1						1	0.01%
Eagle Springs	27242								3										3	0.03%
Elon	27244	11	26	16	8	20	7	18	20	15	6	24	19	21	20	11	20	18	280	3.01%
Ether	27247																	1	1	0.01%
Gibsonville	27249	11	18	14	22	19	19	17	21	10	17	14	9	13	13	8	13	5	243	2.61%
Graham	27253				1	2	2		2				2						10	0.11%
Haw River	27258								1								1		1	0.01%
Hillsborough	27278			1															1	0.01%
Eden	27288			1															1	0.01%
Leasburg	27291	12	16	27	9	27	18	16	22	23	15	22	19	27	18	14	21	23	329	3.53%
Linwood, NC	27299			1								1							2	0.02%
McLeansville	27301																	2	2	0.02%
Mebane	27302	6	14	8	11	9	7	10	18	8	9	6	13	8	13	17	10	10	177	1.90%
Milton	27305	46	32	28	55	46	39	50	65	31	56	37	42	40	32	30	29	35	693	7.45%
Oak Ridge	27310							1											1	0.01%
Pelham	27311	84	88	87	66	94	91	84	113	82	93	79	57	69	85	59	75	71	1377	14.80%
Pittsboro	27312			1					2									1	4	0.04%
Prospect Hill	27314	9	16	7	3	9	6	6	10	2	5	14	3	10	5	2	11	6	124	1.33%
Providence	27315	39	37	34	41	45	54	29	53	41	43	53	29	29	33	38	46	40	684	7.35%
Randleman	27317				1	1				1									3	0.03%
Reidsville	27320	31	33	28	41	37	39	35	36	35	34	47	21	24	21	27	28	40	557	5.98%
Robbins	27325							1											1	0.01%
Ruffin	27326	34	17	28	17	22	26	21	30	32	26	26	24	25	14	20	26	22	410	4.41%
Sedalia	27342					1													1	0.01%
Semora	27343	11	11	5	10	5	5	4	13	10	6	12	7	7	7	5	9	13	140	1.50%
Snow Camp	27349				2		1				1								4	0.04%
Summerfield	27358	1																	1	0.01%
Welcome	27374										1					1			2	0.02%
Wentworth	27375																	1	1	0.01%
Whitsett	27377						1												1	0.01%
Yanceyville	27379	202	200	164	186	194	234	207	222	192	191	198	161	171	156	171	165	189	3203	34.41%
Greensboro	27401							1											1	0.01%
Greensboro	27403									2		1				2	1	1	7	0.08%
Greensboro	27405	1									1				1				2	0.02%
Greensboro	27406			1					1									1	3	0.03%
Greensboro	27407			1	1			1	2			1				1			7	0.08%
Greensboro	27455								1	1			1		1				4	0.04%
Rougemont	27572											1							1	0.01%
Roxboro	27573	3	1	1	1	2	2	1			1						2		14	0.15%
Roxboro	27574				1					3		1				2		1	8	0.09%
Raleigh	27620														1		2		3	0.03%
Durham	27711															1			1	0.01%
Durham	27712						2			1									3	0.03%
Camden	27921														1				1	0.01%
Shelby, NC	28152		1																1	0.01%
Virginia	24***	6	12	12	4	13	8	7	7	10	14	5	9	9	4	6	11	9	146	1.57%
Unknown				4		2					1	2	1	2	6	1	1		20	0.21%
<b>Total</b>		<b>549</b>	<b>568</b>	<b>522</b>	<b>526</b>	<b>600</b>	<b>612</b>	<b>548</b>	<b>715</b>	<b>546</b>	<b>561</b>	<b>592</b>	<b>453</b>	<b>516</b>	<b>476</b>	<b>466</b>	<b>523</b>	<b>536</b>	<b>9,307</b>	<b>100.00%</b>

# North Carolina Health Statistics Pocket Guide

[www.schs.state.nc.us/SCHS](http://www.schs.state.nc.us/SCHS)



**Celebrating**  
**One Hundred Years of Measuring**  
**the Health and Vital Statistics**  
**of North Carolinians**

# A Century of Measuring the Health of North Carolinians

The North Carolina General Assembly created the Bureau of Vital Statistics in 1913 and the first tabulated report of Vital Statistics data were published for 1914 vital events. In 2013, the North Carolina State Center for Health Statistics (SCHS) celebrates 100 years of collecting, analyzing and disseminating data on the health status of North Carolinians. Over the years, the duties of SCHS have expanded beyond vital registration to encompass the collection and analysis of a broader array of health data, including the Central Cancer Registry, the Birth Defects Registry, state and federal health surveys, inpatient hospital discharge, health department records, Medicaid services and eligibility data and other health

services utilization data. However, the central goal of SCHS remains much like it was a century ago—collecting and disseminating high quality health information that enables public health programs and policy leaders to make better informed decisions and effective health policies for North Carolina.

Since 1914, substantial changes in North Carolina's resident population have occurred as well as significant improvements in mortality and birth outcomes (see Table). In 1914, North Carolina's population comprised approximately 2.3 million residents. Based on the latest available Census Bureau estimates, North Carolina's population now stands at more than

9.6 million, representing a 313 percent increase in our state's population during this time period. Related to this population growth, the number of resident deaths have risen 174 percent and the number of births have increased 67 percent since 1914.

While the overall number of vital events has increased over the last century, most health measures have experienced dramatic improvements. North Carolina's maternal and infant mortality have demonstrated some of the most noteworthy declines. In 1914, 90 infants in every 1,000 live births died before reaching their first birthday; compared to seven infants per 1,000 live births in 2011 (92% decline). Similarly, rates of maternal mortality have also experienced significant reductions (93% decline). North Carolina's overall crude death rate has declined by a third during this time period (33% reduction). Despite substantial population growth, North Carolina's resident birth rates have declined

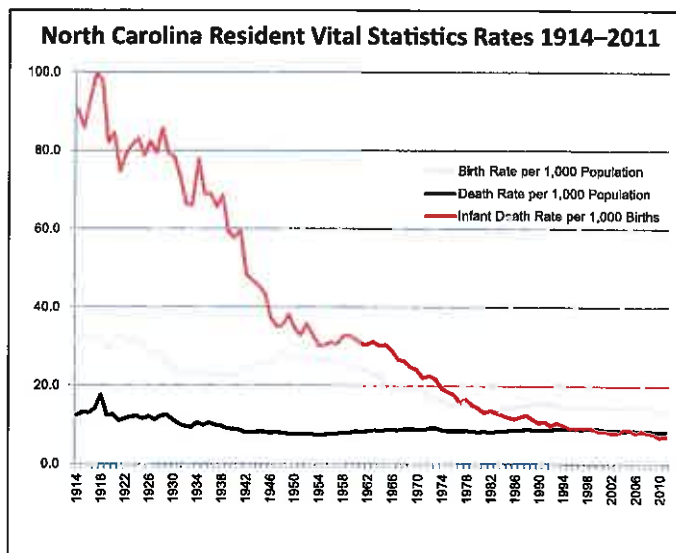
by 59 percent since 1914 when the birth rate stood at 30.7 per 1,000 residents, to a birth rate of just 12.5 per 1,000 in 2011. The 2011 rate represents the lowest recorded birth rate in state history (see Chart).

Daily averages for North Carolina Vital Registrations have also changed since Vital Statistics were first collected in 1914. In 1914, North Carolina's Vital Records office recorded 197 births per day; compared with 330 per day in 2011. In 1914, 80 deaths were recorded per day and by 2011 there were an average of 218 deaths registered each day. The average number of marriage certificates filed per day has also increased significantly since 1914; from 62 in 1914 to an average of 178 marriage certificates registered per day in 2011.

Please visit the SCHS website at [www.schs.state.nc.us/schs/data/vitalstats.cfm](http://www.schs.state.nc.us/schs/data/vitalstats.cfm) for vital statistics reports dating back to 1914.

## Population Health Indicators

Health Indicators	1914	2011
Estimated Population	2,339,452	9,656,401
Births	71,931	120,403
Birth Rate per 1,000 Residents	30.7	12.5
Deaths	29,044	79,680
Death Rate per 1,000 Residents	12.4	8.3
Maternal Deaths	524	56
Maternal Death Rate per 1,000 Births	7.3	0.5
Infant Deaths	6,497	866
Infant Death Rate per 1,000 Births	90.3	7.2
Marriages	22,761	64,789
Marriage Rate per 1,000 Residents	9.7	6.7



## List of Tables

### *United States and North Carolina*

- Table 1. Demographic, Social and Economic Indicators
- Table 2. Work, Farm, Home and School Statistics
- Table 3. Social, Welfare and Health Data
- Table 4. Pregnancy Outcome Statistics
- Table 5. Morbidity and Mortality Statistics
- Table 6. Health Care Resources Data

### *North Carolina and Counties*

- Table 7. Demographic, Economic and Health Resources Data
- Table 8. Selected Health Indicators

## Data Sources

References for the various data items may be obtained from the State Center for Health Statistics. For the United States and North Carolina, comparisons in Tables 1–6 were largely abstracted or derived from the following: *Statistical Abstract of the United States 2012* (Bureau of the Census); *Health-United States 2011* (National Center for Health Statistics); *National Vital Statistics Reports, Births: Final Data for 2010* and *Deaths: Final Data for 2009* (National Center for Health Statistics); *Morbidity and Mortality Weekly Report*, Vol. 59, No. 53, 2012 and Vol. 60, No. 15, 2011 (Centers for Disease Control); the Kaiser Family Foundation; and the Centers for Medicare and Medicaid Services. State and county population data were provided by the National Center for Health Statistics.

## Explanatory Notes

In most cases, table headings and footnotes provide definitions for the reported statistics. Additional information needed for data clarification includes the following:

**Number of States Higher:** This figure is given wherever the statistic or the required numerators and denominators were available for states. NA means not available.

**Place of Event:** Unless otherwise noted, data are by place of residence.

**Rates:** Some of the county-level rates of Table 8 have been adjusted for age. Thus, the differences observed are due to factors other than the age distribution of the populations. For smaller counties, the measures in Table 8 may be unstable due to small numbers of events.

Tables 1–6 compare state figures to the latest available national data.



# Table 1

## Demographic, Social and Economic Indicators

	United States	North Carolina	Number of States Higher
Resident Population, 2010 (millions)	308.7	9.5	9
Percent of Total Population, 2010 Estimate:			
White	72.4	68.3	38
Black	12.6	21.5	7
Hispanic <sup>1</sup>	16.3	8.4	24
Percent Under 5 Years of Age, 2010	6.5	6.6	20
Percent Ages 65 and Over, 2010	13.0	12.9	36
Persons per Household Average, 2006–2010 <sup>2</sup>	2.6	2.5	27
Population per Square Mile of Land, 2010	87.4	196.1	16
Metropolitan Population, 2010 (millions) <sup>3,4</sup>	289.3	8.8	10
Percent of Total	93.7	92.0	26
Nonmetropolitan Population, 2010 (millions) <sup>3,4</sup>	19.5	0.8	8
Percent of Total	6.3	8.0	24
Per Capita Personal Income, 2010 <sup>5</sup>	\$36,524	\$32,073	34
Median Household Income, 2008	\$52,029	\$46,549	36
Home Ownership Rate, 2008	67.8	69.4	31
Percent of Persons Below Poverty Level, 2008	13.3	14.6	14
Percent of Households with Internet Usage Anywhere, 2010	80.2	76.5	40
Percent of Households with no Internet Use, 2010	19.8	23.5	10
Per Capita Federal Income Tax, 2008 <sup>6</sup>	\$3,420	\$2,454	38
Per Capita Total State Tax Collections, 2008 <sup>7</sup>	\$2,571	\$2,470	26
Per Capita State Government General Revenue, 2008 <sup>8</sup>	\$4,979	\$4,673	33
Per Capita State Government Debt Outstanding, 2008	\$3,303	\$2,126	39

<sup>1</sup> Persons of Hispanic origin may be of any race.

<sup>2</sup> This is a five-year average.

<sup>3</sup> Covers core-based statistical areas (metropolitan and micropolitan statistical areas) as defined by the U.S. Office of Management and Budget as of December 2009.

<sup>4</sup> The Non-Metropolitan population in Hawaii, Connecticut, Delaware, District of Columbia, New Jersey and Rhode Island represents, or rounds to, zero.

<sup>5</sup> These figures are represented in 2005 constant dollars.

<sup>6</sup> U.S. State Ranking figure does not include returns filed from Army Post Office and Fleet Post Office addresses by members of the armed forces stationed overseas; returns from citizens abroad and returns filed by residents of Puerto Rico with income from sources outside of Puerto Rico or with income earned as U.S. government employees.

<sup>7</sup> This table includes other items not shown separately. Total taxes that are separated out in this table include license taxes, individual and corporate income taxes, and other state taxes.

<sup>8</sup> General Revenue is from intergovernmental (federal and local government) and other sources, including taxes. Utilities revenue, liquor store revenue and insurance trust revenue are excluded.

**Table 2**  
**Work, Farm, Home and School Statistics**

	<b>United States</b>	<b>North Carolina</b>	<b>Number of States Higher</b>
Civilian Labor Force, 2010 (millions)	153.9	<b>4.6</b>	10
Participation Rate <sup>1</sup>			
Males	71.2	<b>70.3</b>	31
Females	58.6	<b>57.4</b>	32
Percent Unemployed	9.6	<b>10.5</b>	11
Males	10.5	<b>11.7</b>	9
Females	8.6	<b>9.1</b>	14
Employees in Nonagricultural Establishments, 2010 (millions) <sup>2</sup>	129.8	<b>3.9</b>	8
Percent Employed in Manufacturing	8.9	<b>11.2</b>	13
Avg. Hourly Earnings of Manufacturing Production Workers, 2010	\$18.61	<b>\$15.85</b>	40
Annual Percent Increase Since 2001 <sup>3</sup>	2.9	<b>2.6</b>	22
Average Annual Pay, 2009 <sup>4</sup>	\$45,559	<b>\$39,844</b>	31
Full-time Equivalent Employees of State/Local Government, 2009			
State Employees per 10,000 Population <sup>4,5</sup>	143	<b>158</b>	29
Local Gov. Employees per 10,000 Pop. <sup>5</sup>	404	<b>442</b>	8
Mo. Payroll per State Employee (in March) <sup>4,6</sup>	\$4,565	<b>\$4,032</b>	34
Number of Farms, 2010 (thousands) <sup>4</sup>	2,201	<b>52</b>	16
Average Acreage per Farm, 2010 <sup>4</sup>	418	<b>164</b>	39
Number of Households, 2009 (millions)	113.6	<b>3.6</b>	9
Annual Percent Increase Since 2000	0.9	<b>1.8</b>	5
New Privately Owned Single Family Housing Units Authorized, 2010 (thousands)	446.6	<b>26.0</b>	3
Public Elementary and Secondary Schools			
Per Capita Expenditures, 2009 <sup>5</sup>	\$1,944	<b>\$1,513</b>	47
Average Expenditures per Pupil, 2009 <sup>7</sup>	\$10,905	<b>\$9,175</b>	43
Average Salary of Classroom Teachers, 2009 (thousands)	\$54.3	<b>\$48.5</b>	28

<sup>1</sup> Percent of civilian noninstitutional population of each specified group in the civilian labor force.

<sup>2</sup> Excludes proprietors, self-employed, farmworkers, unpaid family workers, domestic workers and Armed Forces.

<sup>3</sup> Workers covered by unemployment laws; excludes most agricultural workers on small farms, Armed Forces, elected officials, railroad, domestic and self-employed individuals.

<sup>4</sup> Excludes the District of Columbia.

<sup>5</sup> Based on estimated population as of July 1, 2009.

<sup>6</sup> Monthly earnings for full-time employees.

<sup>7</sup> In average daily attendance.

**Table 3**  
**Social, Welfare and Health Data**

	United States	North Carolina	Number of States Higher
Federal Food Stamp Program, Benefits per Participant, FY 2010	\$1,604	<b>\$1,538</b>	28
National School Lunch Program, Cost per Participant, FY 2011	\$318	<b>\$338</b>	14
SSI <sup>1</sup> Payments per Recipient, 2009	\$6,069	<b>\$5,566</b>	39
Average Weekly Unemployment Insurance Benefits, 2009	\$317	<b>\$307</b>	22
Average Monthly Social Security Benefit, 2010			
Retired Workers <sup>2</sup>	\$1,176	<b>\$1,168</b>	24
Disabled Workers	\$1,068	<b>\$1,061</b>	21
Widows and Widowers <sup>3</sup>	\$1,134	<b>\$1,097</b>	35
TANF <sup>4</sup> Recipients as a Percent of Resident Population, 2009	1.4	<b>0.5</b>	43
Percent Current Cigarette Smokers, 2009 <sup>5</sup>	20.6	<b>20.3</b>	10
Per Capita Federal Aid to State and Local Governments, FY 2009	\$1,798	<b>\$1,632</b>	32
Per Capita State Government Expenditures, FY 2010 <sup>6</sup>	\$5,251	<b>\$5,112</b>	30
Employment (FTE) in Health, 2009			
State Government (thousands)	184	<b>5</b>	11
Local Government (thousands)	254	<b>16</b>	4
Employment (FTE) in Hospitals, 2009			
State Government (thousands)	417	<b>20</b>	3
Local Government (thousands)	585	<b>40</b>	4
Hazardous Waste Sites on the Superfund Priorities List, 2008	1,301	<b>32</b>	10
Crime Rate per 100,000 Population, 2009 <sup>7</sup>	3,511	<b>4,144</b>	10
Violent Crime <sup>8</sup>	440	<b>414</b>	20
State Parks and Recreation Areas, 2010 Acres per 1,000 Population <sup>6</sup>	45	<b>22</b>	35

<sup>1</sup> Supplemental Security Income.

<sup>2</sup> Excludes special benefits.

<sup>3</sup> Nondisabled only.

<sup>4</sup> Temporary Assistance for Needy Families.

<sup>5</sup> Among civilian population age 18 and over.

<sup>6</sup> Excludes District of Columbia.

<sup>7</sup> Offenses known to the police.

<sup>8</sup> Murder (including non-negligent manslaughter), forcible rape, robbery and aggravated assault.

**Table 4**  
**Pregnancy Outcome Statistics**  
*(Data from State and National Reporting Systems)*

	United States	North Carolina	Number of States Higher
Legal Induced Abortions, 2008 (thousands) <sup>1</sup>	825.6	31.8	6
Live Births, 2010 (thousands) <sup>2,3</sup>	3,999.4	122.3	8
White	3,069.3	86.2	8
Black	636.4	29.9	5
Hispanic <sup>4</sup>	945.2	18.7	9
Annual Percent Decrease Since 2007	-2.4	-2.2	23
Number per 1,000 Population <sup>2</sup>	13.0	12.8	26
Number per 1,000 Women Ages 15–44 <sup>2</sup>	64.1	62.8	28
Percent Minority Births	23.3	29.5	10
Percent Hispanic Births <sup>4</sup>	23.6	15.3	19
Percent 5 Pounds 8 Ounces or less <sup>2</sup>	8.1	9.1	6
White, Non-Hispanic	7.1	7.8	12
Black, Non-Hispanic <sup>5</sup>	13.5	14.0	9
Hispanic <sup>4,5</sup>	7.0	6.2	38
Percent 3 Pounds 4 Ounces or less <sup>2</sup>	1.4	1.7	6
White, Non-Hispanic	1.2	1.3	6
Black, Non-Hispanic <sup>5</sup>	3.0	3.1	11
Hispanic <sup>4,5</sup>	1.2	1.1	26
Percent Mothers Unmarried <sup>2</sup>	40.8	42.0	16
White, Non-Hispanic	29.0	27.0	33
Black, Non-Hispanic	72.5	72.9	17
Hispanic <sup>4</sup>	53.4	53.2	18
Percent Delivered Preterm <sup>2,6</sup>	12.0	12.7	14
White, Non-Hispanic	10.8	11.2	15
Black, Non-Hispanic <sup>5</sup>	17.1	17.2	17
Hispanic <sup>4,5</sup>	11.8	11.8	27
Percent by Cesarean Delivery <sup>2</sup>	32.8	31.0	27
White, Non-Hispanic	32.6	31.8	26
Black, Non-Hispanic	35.5	32.8	26
Hispanic <sup>4</sup>	31.8	25.4	43
Multiple Birth Rate, 2008–2010 <sup>7</sup>	34.5	34.7	19
Teen Birth Rate, 2010 <sup>8</sup>	34.2	38.3	16
Neonatal Deaths per 1,000 Live Births, 2009	4.2	5.3	2
Postneonatal Deaths per 1,000 Neonatal Survivors, 2009	2.2	2.6	14
Infant Deaths per 1,000 Live Births, 2009	6.4	7.9	4

<sup>1</sup> By place of occurrence, as collected by the Centers for Disease Control and Prevention. Excludes California, Maryland and New Hampshire.

<sup>2</sup> Includes races other than white and black.

<sup>3</sup> White, black and Hispanic, where used, apply to race or Hispanic origin of mother.

<sup>4</sup> Persons of Hispanic origin may be of any race.

<sup>5</sup> U.S. data exclude certain states (usually 10 or less) with a small minority population.

<sup>6</sup> Less than 37 completed weeks of gestation.

<sup>7</sup> Twins, triplets and other higher order multiple births per 1,000 total live births.

<sup>8</sup> Births to mothers ages 15–19 per 1,000 females ages 15–19.



**Table 5**  
**Morbidity and Mortality Statistics**  
*(Data from State and National Reporting Systems)*

<b>Morbidity Rates 2010<sup>1</sup></b>	<b>United States</b>	<b>North Carolina</b>	<b>Number of States Higher</b>
Reported Syphilis (all stages)	14.8	<b>12.9</b>	14
Reported Gonorrhea (all sites)	100.0	<b>147.6</b>	7
Chlamydia	422.8	<b>439.8</b>	17
Verified Tuberculosis	3.6	<b>3.1</b>	17
Hepatitis A	0.5	<b>0.5</b>	25
Hepatitis B	1.1	<b>1.2</b>	15
HIV <sup>2</sup>	11.6	<b>13.8</b>	6

<b>Age-adjusted Mortality Rates, 2011<sup>3</sup></b>	<b>North Carolina</b>				
	<b>Total</b>	<b>White Male</b>	<b>White Female</b>	<b>Minority Male</b>	<b>Minority Female</b>
All Causes	<b>788.7</b>	<b>907.6</b>	<b>656.2</b>	<b>1,044.0</b>	<b>720.2</b>
Heart Disease	<b>167.5</b>	<b>208.8</b>	<b>127.0</b>	<b>229.3</b>	<b>145.1</b>
Cerebrovascular Disease	<b>43.1</b>	<b>40.3</b>	<b>38.5</b>	<b>59.7</b>	<b>51.0</b>
Atherosclerosis	<b>1.9</b>	<b>2.0</b>	<b>1.9</b>	<b>1.7</b>	<b>1.7</b>
Cancer	<b>174.3</b>	<b>211.0</b>	<b>139.2</b>	<b>259.9</b>	<b>154.5</b>
Diabetes Mellitus	<b>22.1</b>	<b>21.9</b>	<b>14.9</b>	<b>46.9</b>	<b>34.8</b>
Pneumonia/Influenza	<b>16.3</b>	<b>19.3</b>	<b>15.2</b>	<b>16.1</b>	<b>12.0</b>
Chronic Lower Respiratory Diseases	<b>46.7</b>	<b>55.5</b>	<b>48.8</b>	<b>36.4</b>	<b>19.1</b>
Chronic Liver Disease and Cirrhosis	<b>9.4</b>	<b>13.9</b>	<b>7.0</b>	<b>9.2</b>	<b>4.1</b>
Nephritis/Nephrosis	<b>17.0</b>	<b>17.7</b>	<b>10.8</b>	<b>35.1</b>	<b>29.3</b>
Septicemia	<b>13.0</b>	<b>12.4</b>	<b>10.9</b>	<b>22.0</b>	<b>17.6</b>
Alzheimer's Disease	<b>29.2</b>	<b>22.7</b>	<b>33.8</b>	<b>19.8</b>	<b>28.6</b>
HIV Disease	<b>2.6</b>	<b>1.5</b>	<b>0.2</b>	<b>11.3</b>	<b>5.5</b>
Motor Vehicle Unintentional Injuries	<b>12.8</b>	<b>18.7</b>	<b>7.8</b>	<b>19.0</b>	<b>5.8</b>
All Other Unintentional Injuries	<b>30.4</b>	<b>43.2</b>	<b>24.9</b>	<b>29.5</b>	<b>13.9</b>
Suicide	<b>12.1</b>	<b>22.6</b>	<b>6.8</b>	<b>9.7</b>	<b>1.4</b>
Homicide	<b>5.5</b>	<b>4.6</b>	<b>2.1</b>	<b>18.2</b>	<b>3.5</b>

<sup>1</sup> Cases per 100,000 population. Cases are from the Centers for Disease Control and Prevention.

<sup>2</sup> Data on human immunodeficiency virus (HIV) diagnoses include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis.

<sup>3</sup> Deaths per 100,000 population using 10-year age groups and U.S. 2000 population as standard for direct age adjustment.

**Table 6**  
**Health Care Resources Data**

	United States	North Carolina	Number of States Higher
<b>Availability of Health Care Services<sup>1</sup></b>			
Total Physicians per 10,000 Civilian Population, 2009	27.4	25.0	28
Physicians in Patient Care per 10,000 Civilian Population, 2009	25.4	23.4	29
Hospital Beds per 1,000 Population, 2009	2.6	2.4	28
Hospital Beds Occupancy Rate (percent), 2009	66	69	10
Nursing Homes, 2010	15,690	424	12
Nursing Homes Beds (thousands), 2010	1,703	44	12
Nursing Home Residents (thousands), 2009	1,401	38	12
Nursing Home Occupancy Rate (percent), 2010	82.0	83.8	27
<b>Uninsured Overall Population<sup>2</sup></b>			
Uninsured Total Population (percent), 2010–2011	16.0	17.0	15
Uninsured Children 0–18 (percent), 2010–2011	10.0	10.0	14
Uninsured Adults 19–64 (percent), 2010–2011	21.0	23.0	14
Uninsured African-American Nonelderly (percent), 2010–2011 <sup>3</sup>	21.0	23.0	8
Uninsured Hispanic Nonelderly (percent), 2010–2011 <sup>4</sup>	32.0	42.0	6
Uninsured White Nonelderly (percent), 2010–2011	13.0	15.0	15
<b>Uninsured Population within Poverty<sup>2</sup></b>			
Uninsured Children 0–18 within Poverty Rate (percent), 2010–2011 <sup>5</sup>	15.0	13.0	29
Uninsured Nonelderly Adult within Poverty Rate (percent), 2010–2011	42.0	47.0	13
<b>Medicare and Medicaid<sup>2</sup></b>			
Medicare Enrollment as a Percent of Total Population, 2010	15.0	16.0	18
Medicaid Enrollment as a Percent of Total Population, FY 2009	20.0	19.0	18

<sup>1</sup> Source: Health, United States 2011, Tables 109, 118, 119, 120.

<sup>2</sup> Source: The Kaiser Family Foundation Statehealthfacts.org.

<sup>3</sup> Nineteen states with data not reported.

<sup>4</sup> Seven states with data not reported.

<sup>5</sup> Thirteen states with data not reported.

**Table 7**  
**Demographic, Economic, and Health Resources Data**

**A. Resident Population July 1, 2011**

Resident Data	Total Population	Percent Change Since 2000 Census	Percent of Total Population in Selected Age-Race-Sex Groups													
			White Male			White Female				Minority Male			Minority Female			
			Total	<20	65+	Total	<20	15-44	65+	Total	<20	65+	Total	<20	15-44	65+
<b>North Carolina</b>	<b>9,656,401</b>	<b>20.0</b>	<b>36.9</b>	<b>9.3</b>	<b>4.7</b>	<b>37.1</b>	<b>8.8</b>	<b>14.1</b>	<b>6.1</b>	<b>12.7</b>	<b>4.3</b>	<b>0.9</b>	<b>14.2</b>	<b>4.2</b>	<b>6.2</b>	<b>1.4</b>
Alamance	153,291	17.2	37.0	10.0	5.2	40.2	9.7	15.3	7.2	10.6	3.5	0.9	12.2	3.4	5.0	1.5
Alexander	37,087	10.4	46.1	11.5	6.6	46.1	10.9	16.2	8.3	4.6	1.1	0.4	3.2	1.0	1.1	0.5
Alleghany	11,052	3.5	47.8	10.5	9.3	49.1	10.4	14.8	11.8	1.7	0.7	0.2	1.4	0.5	0.6	0.1
Anson	26,609	5.3	25.3	5.1	4.0	23.5	4.9	7.4	5.6	26.6	7.0	1.9	24.6	7.0	9.7	3.3
Ashe	27,143	11.3	48.2	10.4	9.1	49.8	9.8	15.2	11.6	1.0	0.3	0.1	0.9	0.3	0.3	0.1
Avery	17,572	2.4	50.2	9.6	7.8	44.4	9.4	15.1	9.4	4.5	0.4	0.1	0.9	0.4	0.5	0.1
Beaufort	47,691	6.1	35.2	8.3	6.9	36.9	7.6	11.4	8.4	12.8	4.1	1.5	15.1	4.1	5.3	2.3
Bertie	20,874	5.6	18.1	3.6	3.6	18.1	3.1	5.2	4.7	31.6	8.2	3.7	32.3	7.9	11.0	5.8
Bladen	34,928	8.2	30.0	7.3	4.7	30.9	6.9	10.5	6.0	17.9	5.5	2.1	21.1	5.3	7.6	3.5
Brunswick	110,097	50.5	42.3	8.3	10.2	44.0	7.7	12.7	10.6	6.6	2.1	0.7	7.1	2.0	2.7	0.9
Buncombe	241,419	17.0	43.7	10.1	6.5	47.2	9.6	17.5	8.8	4.4	1.5	0.4	4.7	1.4	1.9	0.5
Burke	90,904	2.0	43.0	10.6	6.6	44.4	9.7	15.0	8.8	6.9	2.9	0.4	5.6	1.9	2.4	0.6
Cabarrus	181,466	38.5	39.6	11.6	4.4	40.9	10.9	15.9	5.8	9.2	3.6	0.5	10.3	3.4	4.6	0.9
Caldwell	82,395	6.4	45.8	11.3	6.7	47.3	10.8	16.7	8.6	3.5	1.2	0.3	3.5	1.2	1.3	0.4
Camden	10,014	45.4	41.4	11.5	5.2	41.7	11.4	15.9	5.6	8.3	2.6	1.0	8.7	2.3	2.9	1.3
Carteret	67,373	13.5	45.0	9.5	8.7	46.2	8.7	14.5	9.9	4.4	1.4	0.4	4.4	1.2	1.6	0.6
Caswell	23,403	-0.4	32.9	7.4	5.1	31.8	6.8	10.5	6.0	18.2	4.0	2.2	17.3	3.8	5.2	3.4
Catawba	154,181	8.8	42.3	10.9	5.9	44.1	10.3	15.9	7.7	6.7	2.4	0.4	6.9	2.4	3.0	0.6
Chatham	64,195	30.1	40.3	9.8	7.2	42.9	9.2	13.5	9.1	7.9	2.2	1.0	9.0	2.3	2.9	1.5
Cherokee	27,194	11.9	46.4	9.8	10.7	49.2	9.4	14.1	12.6	2.3	0.7	0.3	2.1	0.6	0.7	0.4
Chowan	14,853	2.3	31.4	7.1	6.5	32.6	6.7	9.5	8.1	16.3	5.4	2.0	19.7	5.1	6.6	3.2
Clay	10,563	20.4	48.2	10.6	11.1	49.6	8.7	14.0	12.7	1.1	0.4	0.1	1.1	0.5	0.4	0.1
Cleveland	97,489	1.2	37.7	9.7	5.6	39.7	9.1	14.2	7.4	10.5	3.7	0.9	12.1	3.6	4.7	1.5
Columbus	57,712	5.4	31.6	7.6	4.8	32.9	7.8	11.1	6.5	17.9	5.0	1.7	17.7	5.0	6.4	2.7
Craven	194,786	14.6	37.1	8.6	5.8	36.4	8.4	13.2	7.1	12.8	4.2	1.1	13.7	4.1	5.4	1.7
Cumberland	324,885	7.2	28.0	7.9	2.5	28.0	7.4	12.3	3.5	20.5	7.3	1.4	23.5	7.1	10.4	2.2
Currituck	23,955	31.7	45.8	11.7	5.8	46.2	11.3	16.6	6.5	3.9	1.2	0.3	4.2	1.2	1.4	0.6
Dare	34,307	14.5	47.3	10.3	7.3	48.0	9.9	15.8	8.1	2.3	0.8	0.2	2.4	0.8	1.0	0.2
Davidson	162,697	10.5	43.4	11.3	6.0	44.7	10.7	16.1	7.6	5.7	2.0	0.4	6.2	1.9	2.5	0.7
Davie	41,552	19.3	44.6	11.8	7.1	46.8	10.8	15.7	9.0	4.0	1.3	0.5	4.6	1.4	1.6	0.6
Duplin	59,542	21.4	35.7	10.2	4.6	35.2	9.3	13.0	5.8	13.6	4.1	1.6	15.5	4.0	5.6	2.5
Durham	273,392	22.4	26.7	6.4	2.7	27.6	6.1	12.4	3.8	21.0	6.8	1.4	24.7	6.7	11.8	2.2
Edgecombe	56,041	0.8	19.7	4.9	3.3	21.3	4.6	7.1	4.4	26.8	8.8	2.7	32.1	8.3	12.2	4.5
Forsyth	354,952	16.0	33.3	8.8	4.5	35.8	8.5	13.2	6.2	14.2	5.0	1.0	16.8	5.0	7.6	1.6
Franklin	61,140	29.4	35.4	9.6	4.2	35.2	8.8	12.7	5.4	14.2	4.3	1.5	15.2	4.1	5.6	2.2
Gaston	207,031	8.8	39.8	10.3	5.1	42.0	9.8	15.7	7.0	8.5	3.1	0.6	9.7	3.0	4.1	0.9
Gates	12,043	14.5	32.2	8.3	4.7	32.4	7.9	11.5	5.1	17.0	4.8	2.5	18.5	4.4	6.3	3.2
Graham	8,802	10.1	45.3	10.6	8.9	46.5	9.5	14.8	10.4	4.1	1.9	0.2	4.1	1.5	1.6	0.5
Granville	59,976	23.7	33.9	8.2	4.0	30.5	7.4	11.3	4.6	19.5	4.8	1.8	16.0	4.1	5.9	2.5
Greene	21,556	13.6	31.6	7.5	3.7	27.8	6.8	9.7	4.9	22.3	5.5	1.5	18.3	5.4	6.7	2.3
Guilford	495,279	17.6	29.4	7.3	4.1	31.4	7.0	11.9	5.5	18.1	6.2	1.2	21.1	6.2	10.2	1.8
Halifax	54,173	-5.6	20.1	4.6	3.7	21.2	4.5	6.4	5.0	27.7	8.4	3.0	31.0	8.0	11.2	4.8
Harnett	119,256	31.0	36.3	11.1	3.6	37.5	10.4	15.7	4.8	12.4	4.6	0.8	13.5	4.6	5.9	1.2
Haywood	58,855	8.9	46.9	10.5	9.4	50.4	9.7	15.9	12.0	1.3	0.4	0.1	1.4	0.4	0.5	0.2
Henderson	107,927	21.0	45.5	10.3	9.8	48.7	9.8	14.5	12.4	2.8	1.0	0.2	3.0	1.0	1.2	0.3
Hertford	24,433	8.1	18.8	3.8	3.2	17.7	3.4	5.6	4.1	30.1	9.0	3.3	33.3	8.9	12.1	5.6
Hoke	49,272	46.4	26.2	8.3	1.7	26.2	8.0	12.3	2.1	22.7	8.0	1.5	24.9	7.9	10.5	2.1
Hyde	5,822	-0.1	35.4	7.6	4.8	31.0	6.5	10.6	5.9	20.3	2.9	1.7	13.3	3.4	3.7	3.0
Iredell	161,202	31.4	41.8	11.4	5.2	42.6	10.7	15.6	6.6	7.4	2.7	0.5	8.2	2.6	3.4	0.8
Jackson	40,285	21.6	42.7	9.8	6.6	43.5	9.6	18.6	7.9	6.9	2.5	0.4	6.9	2.3	3.2	0.6

**Table 7**  
**Demographic, Economic, and Health Resources Data**

A. Resident Population July 1, 2011																
Resident Data	Total Population	Percent Change Since 2000 Census	Percent of Total Population in Selected Age-Race-Sex Groups													
			White Male			White Female				Minority Male			Minority Female			
			Total	<20	65+	Total	<20	15-44	65+	Total	<20	65+	Total	<20	15-44	65+
Johnston	172,595	41.5	40.4	12.2	3.9	41.4	11.6	16.3	5.2	8.8	3.2	0.6	9.4	3.0	4.0	0.9
Jones	10,020	-3.5	32.4	7.4	5.1	33.3	6.8	10.9	6.4	15.9	4.3	2.5	18.3	4.5	5.5	3.4
Lee	58,752	19.8	37.8	10.7	4.9	38.6	9.9	14.3	6.6	11.2	3.8	0.9	12.4	3.8	4.9	1.4
Lenoir	59,339	-0.5	28.0	7.0	4.7	29.1	6.5	9.4	6.3	19.8	6.7	1.9	23.0	6.1	8.2	3.3
Lincoln	78,932	23.8	45.9	12.0	5.9	46.6	11.1	17.2	7.1	3.7	1.2	0.3	3.8	1.2	1.4	0.4
McDowell	45,104	7.0	46.5	11.2	7.3	47.4	10.4	16.1	9.2	3.4	0.9	0.2	2.7	1.0	1.1	0.3
Macon	34,074	14.3	46.7	10.3	10.9	49.9	9.7	13.9	13.5	1.8	0.7	0.2	1.6	0.6	0.7	0.1
Madison	20,816	6.0	48.1	11.5	8.1	49.4	10.2	17.1	9.8	1.3	0.5	0.1	1.1	0.5	0.6	0.1
Martin	24,180	-5.5	26.5	5.9	4.8	28.5	5.9	8.8	6.3	20.1	6.2	2.6	24.9	6.2	8.4	4.3
Mecklenburg	944,373	35.8	30.5	8.1	2.8	31.2	7.7	13.4	3.9	17.8	6.1	0.9	20.5	6.0	9.9	1.4
Mitchell	15,445	-1.5	47.6	10.5	9.5	50.1	9.6	15.3	11.9	1.1	0.4	0.1	1.1	0.5	0.5	0.1
Mongomery	27,667	3.2	38.3	9.9	5.9	39.6	9.6	13.6	7.3	10.2	3.4	1.0	11.9	3.2	4.7	1.5
Moore	89,352	19.5	40.4	9.5	9.3	43.2	8.9	13.0	11.2	7.4	2.5	0.8	9.0	2.5	3.3	1.4
Nash	96,116	9.9	29.2	7.3	4.4	30.1	6.9	9.9	5.9	19.1	6.1	1.6	21.7	6.0	8.8	2.5
New Hanover	206,189	28.6	39.6	8.9	5.4	42.2	8.9	17.6	7.1	6.4	2.8	0.7	9.5	2.7	4.0	1.1
Northampton	21,893	-0.9	20.4	4.2	4.5	20.0	3.5	5.3	5.8	28.0	8.0	3.7	31.5	7.2	10.1	6.3
Onslow	179,719	19.5	42.8	12.0	2.8	35.8	10.1	17.3	3.5	11.0	3.9	0.5	10.5	3.4	4.7	0.9
Orange	135,755	14.8	37.8	9.9	3.7	40.9	10.1	19.2	4.7	9.9	3.2	0.6	11.4	3.2	5.7	1.0
Pamlico	13,197	2.0	38.9	7.4	8.8	38.7	7.6	10.8	9.0	11.9	2.3	1.6	10.4	2.4	2.9	2.6
Pasquotank	40,696	16.6	29.1	7.3	4.1	29.9	6.7	10.9	5.6	19.7	6.1	1.7	21.3	6.0	9.4	2.6
Pender	53,399	30.0	40.1	9.8	5.9	39.7	9.4	14.1	6.6	9.9	2.9	1.2	10.3	2.9	3.6	1.7
Perquimans	13,487	18.6	36.1	7.4	8.6	37.7	7.3	11.2	9.4	12.0	3.6	1.6	14.2	3.7	4.7	2.5
Person	39,637	11.3	34.8	8.8	5.1	36.3	8.3	12.4	6.8	13.7	4.2	1.5	15.2	4.0	5.5	2.2
Pitt	171,134	27.9	30.0	7.8	3.0	32.2	7.8	15.9	4.1	17.2	6.0	1.2	20.7	6.0	9.8	1.8
Polk	20,256	10.5	45.1	9.7	10.4	48.9	9.0	13.0	13.2	2.9	1.0	0.4	3.1	0.9	1.0	0.6
Randolph	142,358	9.1	44.9	12.2	6.0	46.2	11.4	16.8	7.7	4.4	1.6	0.3	4.5	1.5	1.8	0.5
Richmond	46,611	0.1	31.6	7.9	4.7	32.2	7.4	11.1	6.3	17.6	6.0	1.5	18.6	5.7	7.5	2.0
Robeson	135,517	9.9	16.9	4.6	2.2	17.0	4.3	6.3	3.0	31.8	11.0	2.6	34.4	10.5	14.3	3.8
Rockingham	93,329	1.5	38.4	9.4	5.9	40.7	8.8	13.9	8.1	9.8	2.9	1.0	11.1	2.8	4.1	1.6
Rowan	138,019	5.9	40.1	10.3	5.5	41.1	9.8	14.8	7.3	9.2	3.1	0.7	9.6	2.8	4.0	1.1
Rutherford	67,538	7.4	42.6	10.4	7.1	45.6	10.3	15.2	9.4	5.7	1.8	0.5	6.1	1.8	2.3	0.8
Sampson	63,734	5.9	33.7	9.4	4.4	34.0	8.9	12.4	5.9	15.5	4.9	1.7	16.9	4.6	6.1	2.6
Scotland	35,861	-0.4	23.3	5.6	3.8	24.9	5.3	8.4	5.3	25.0	8.6	1.9	26.8	8.3	10.4	3.1
Stanly	60,626	4.3	42.5	10.5	6.4	43.3	9.9	15.2	8.4	7.3	2.4	0.5	6.9	2.3	2.9	0.7
Stokes	47,242	5.7	46.0	11.3	6.8	48.4	10.9	16.7	9.1	2.8	0.9	0.3	2.8	0.8	0.9	0.4
Surry	73,714	3.5	46.0	12.0	6.9	48.3	11.3	16.4	9.5	2.8	1.0	0.2	2.9	0.9	1.0	0.4
Swain	14,043	8.3	33.4	7.4	6.4	35.3	7.0	11.1	7.8	15.2	5.7	1.2	16.1	5.7	7.0	1.7
Transylvania	32,820	11.9	45.3	9.3	11.5	49.0	8.7	13.9	14.3	3.0	1.0	0.2	2.8	1.0	1.0	0.3
Tyrrell	4,364	5.2	29.9	6.2	4.6	28.8	6.6	9.4	5.9	24.8	3.8	2.4	16.4	3.8	4.9	3.5
Union	205,463	66.1	42.0	13.8	4.0	42.8	13.2	16.6	5.0	7.3	2.8	0.5	7.9	2.7	3.3	0.7
Vance	45,307	5.5	23.1	5.9	3.7	24.7	5.7	8.1	5.2	23.8	8.4	2.1	26.4	8.0	11.4	3.5
Wake	929,780	48.1	35.2	9.9	3.0	36.0	9.4	15.3	4.0	13.5	4.7	0.7	15.3	4.6	7.4	1.0
Warren	20,661	4.5	21.1	3.9	4.6	19.7	3.5	5.3	5.2	29.5	7.4	3.9	29.7	7.6	9.8	5.6
Washington	12,973	-5.5	23.7	4.9	5.3	25.0	4.8	6.8	6.8	23.3	8.0	2.6	27.9	7.2	10.4	4.3
Watauga	51,333	20.2	48.1	10.7	5.7	48.1	10.7	24.9	6.9	2.0	0.6	0.1	1.8	0.6	1.2	0.1
Wayne	123,697	9.1	32.5	8.6	4.0	32.3	8.0	12.3	5.4	16.5	5.4	1.5	18.8	5.2	7.3	2.5
Wilkes	68,984	5.1	46.3	11.5	7.4	48.0	10.9	16.1	9.4	2.9	0.9	0.3	2.7	0.8	0.9	0.4
Wilson	81,452	10.3	28.5	7.5	4.2	29.7	7.0	10.3	5.8	19.2	6.5	1.7	22.6	6.2	8.9	2.8
Yadkin	38,279	5.3	46.9	12.4	7.0	48.3	11.1	17.0	9.1	2.3	0.9	0.2	2.5	0.9	0.9	0.3
Yancey	17,701	-0.4	47.9	11.1	9.3	49.6	9.9	15.6	11.6	1.4	0.5	0.1	1.2	0.5	0.5	0.1



**Table 7**  
**Demographic, Economic, and Health Resources Data**  
**B. Economic and Health Resources Data**

Resident Data	Income Levels		Health Care Personnel <sup>1</sup> 2011				Hospital Use Rate, 2010 <sup>5</sup>
	Per Capita, 2010	Percent Persons Below Poverty, 2010	Persons Per Primary Care Physician <sup>2</sup>	Persons Per Primary Care Physician Plus Extenders <sup>3</sup>	Persons Per Registered Nurse <sup>4</sup>	Persons Per Dentist <sup>4</sup>	
<b>North Carolina</b>	<b>\$35,007</b>	<b>17.4</b>	<b>1,158</b>	<b>714</b>	<b>101</b>	<b>2,286</b>	<b>114</b>
Alamance	30,720	18.5	1,548	1,106	147	2,395	126
Alexander	29,700	16.9	3,091	1,693	322	5,298	112
Alleghany	30,522	23.0	1,579	951	270	5,526	130
Anson	24,822	22.6	1,901	1,599	205	5,322	142
Ashe	28,101	20.0	1,597	1,034	210	3,878	127
Avery	28,275	23.5	2,197	1,261	161	2,510	132
Beaufort	31,509	20.7	1,766	1,049	114	2,805	132
Bertie	28,884	27.0	3,479	1,500	205	20,874	133
Bladen	28,406	22.3	2,495	1,316	212	5,821	126
Brunswick	32,220	16.5	1,866	1,117	206	3,058	112
Buncombe	33,777	17.1	658	416	56	1,558	109
Burke	29,317	18.7	1,443	967	94	3,030	110
Cabarrus	33,926	12.5	1,049	733	97	2,927	119
Caldwell	26,958	18.4	1,791	1,265	190	4,120	113
Camden	35,414	9.7	10,014	10,014	556	-	51
Carteret	38,728	14.1	1,643	816	123	1,643	125
Caswell	29,984	20.8	2,925	1,603	498	7,801	65
Catawba	32,504	14.5	1,177	627	78	2,235	110
Chatham	45,804	14.2	2,071	1,497	283	3,776	80
Cherokee	25,518	18.1	1,700	999	120	3,022	93
Chowan	33,122	21.1	928	698	91	2,476	125
Clay	27,199	18.8	2,641	1,447	216	2,641	74
Cleveland	29,990	20.9	1,317	853	97	2,785	147
Columbus	28,300	26.9	1,649	940	135	6,412	147
Craven	35,867	17.5	1,397	855	100	2,329	141
Cumberland	42,523	18.2	820	513	112	2,389	103
Currituck	38,239	11.1	5,989	4,006	461	4,791	38
Dare	37,747	12.3	1,144	717	152	1,715	59
Davidson	32,068	17.3	2,199	1,559	215	6,508	103
Davie	35,231	14.0	2,187	1,375	283	3,463	111
Duplin	28,306	23.7	2,589	1,560	205	4,962	116
Durham	37,964	18.4	459	263	43	1,536	106
Edgecombe	27,103	24.5	3,297	1,897	166	7,005	162
Forsyth	37,059	16.7	727	410	54	1,972	121
Franklin	29,071	16.0	5,095	2,971	330	8,734	102
Gaston	33,922	19.9	1,380	883	128	2,556	142
Gates	26,105	17.5	12,043	7,255	634	12,043	47
Graham	24,468	22.5	2,934	1,561	304	4,401	116
Granville	27,588	15.5	952	661	86	3,157	105
Greene	26,103	23.7	2,695	1,623	263	4,311	113
Guilford	36,748	17.9	1,157	679	84	1,920	119
Halifax	28,819	26.2	1,642	1,080	125	4,514	179
Harnett	28,537	16.7	3,138	1,577	295	5,679	113
Haywood	30,980	14.6	1,471	904	134	2,029	129
Henderson	35,577	15.8	1,101	680	104	2,248	122
Hertford	27,093	26.1	1,437	792	76	3,490	118
Hoke	30,972	19.0	4,106	2,320	432	6,159	85
Hyde	28,745	21.9	5,822	1,599	208	-	96
Iredell	31,810	13.3	1,240	780	106	2,041	121
Jackson	27,218	19.3	1,300	727	109	2,686	93

<sup>1</sup> A dash (—) indicates county had no resource of the type stated. Practitioners are by county of practice, October 2011.

<sup>2</sup> Active federal and nonfederal physicians in general or family practice, internal medicine, pediatrics and obstetrics/gynecology. Physicians providing very little direct patient care are excluded.

<sup>3</sup> Physician extenders are nurse practitioners and physician assistants, each weighted as .66 of a physician and added to the number of primary care physicians.

<sup>4</sup> Active federal and nonfederal.

<sup>5</sup> Based on county of residence. Rates are per 1,000 population. Numerators are 2010 discharges from nonfederal hospitals located in North Carolina. Normal newborn babies are excluded. Only North Carolina residents served in North Carolina hospitals are included. Counties bordering other states may have smaller rates due to patients leaving North Carolina for hospital care.

**Table 7**  
**Demographic, Economic, and Health Resources Data**  
**B. Economic and Health Resources Data**

Resident Data	Income Levels		Health Care Personnel <sup>1</sup> 2011				Hospital Use Rate, 2010 <sup>5</sup>
	Per Capita, 2010	Percent Persons Below Poverty, 2010	Persons Per Primary Care Physician <sup>2</sup>	Persons Per Primary Care Physician Plus Extenders <sup>3</sup>	Persons Per Registered Nurse <sup>4</sup>	Persons Per Dentist <sup>4</sup>	
Johnston	32,731	16.1	2,431	1,570	245	4,794	109
Jones	33,393	18.4	1,113	861	213	10,020	165
Lee	32,193	18.6	1,199	846	151	2,671	154
Lenoir	31,426	23.2	1,562	1,038	92	2,697	173
Lincoln	33,029	15.0	1,716	1,290	208	3,759	107
McDowell	25,353	19.9	1,555	1,006	171	5,638	115
Macon	29,793	19.3	974	770	159	2,272	107
Madison	28,153	19.7	1,892	1,279	325	5,204	106
Martin	29,728	23.4	1,860	1,546	170	4,030	156
Mecklenburg	43,882	15.6	1,021	639	86	1,593	98
Mitchell	26,562	18.5	813	619	77	3,089	141
Montgomery	27,230	24.6	6,917	2,981	307	6,917	123
Moore	38,216	16.6	1,207	667	68	1,625	135
Nash	34,640	15.6	1,413	888	90	2,465	140
New Hanover	35,085	18.1	933	494	72	1,412	105
Northampton	28,541	22.5	4,379	3,137	337	21,893	160
Onslow	43,990	15.8	1,257	841	186	3,209	90
Orange	46,713	17.4	405	267	40	1,044	82
Pamlico	35,325	15.2	1,885	1,281	259	2,639	118
Pasquotank	27,915	22.9	1,197	713	93	3,700	87
Pender	30,381	16.7	3,560	1,850	280	2,967	110
Perquimans	29,068	16.4	6,744	4,062	450	6,744	98
Person	29,282	16.4	2,332	1,258	214	4,404	127
Pitt	32,001	21.6	685	400	49	2,445	111
Polk	37,319	14.4	1,350	884	155	2,251	83
Randolph	28,723	18.1	2,157	1,383	238	3,848	106
Richmond	27,741	28.1	1,371	1,002	132	4,237	193
Robeson	24,599	31.5	1,594	926	146	5,019	167
Rockingham	29,920	18.5	2,029	1,222	231	3,889	142
Rowan	29,816	20.1	914	688	118	3,000	114
Rutherford	25,258	25.0	1,732	1,175	148	3,973	124
Sampson	29,729	21.4	1,634	1,148	192	4,552	143
Scotland	28,525	27.2	1,195	750	107	4,483	161
Stanly	29,165	15.4	1,595	1,086	140	3,789	128
Stokes	28,919	14.3	4,295	2,191	321	7,874	110
Surry	29,685	19.3	1,084	669	114	3,205	147
Swain	27,528	18.5	540	371	111	2,809	191
Transylvania	30,937	15.9	965	771	137	3,282	122
Tyrrell	23,925	28.7	-	6,612	436	-	106
Union	34,184	9.2	2,446	1,636	223	3,877	93
Vance	28,785	24.3	1,259	767	154	3,776	139
Wake	41,440	12.0	1,122	699	96	1,444	93
Warren	24,047	27.1	20,861	5,731	485	4,172	93
Washington	29,133	22.4	3,243	1,224	178	6,487	139
Watauga	29,151	24.8	1,283	797	118	1,770	76
Wayne	29,893	19.7	1,586	955	110	2,632	135
Wilkes	30,975	19.9	1,725	1,129	152	3,631	138
Wilson	33,044	22.9	1,939	1,015	117	3,133	141
Yadkin	29,959	15.1	2,552	1,772	361	5,468	136
Yancey	25,418	20.3	1,475	889	281	4,425	127

<sup>1</sup> A dash (—) indicates county had no resource of the type stated. Practitioners are by county of practice, October 2011.

<sup>2</sup> Active federal and nonfederal physicians in general or family practice, internal medicine, pediatrics and obstetrics/gynecology. Physicians providing very little direct patient care are excluded.

<sup>3</sup> Physician extenders are nurse practitioners and physician assistants, each weighted as .66 of a physician and added to the number of primary care physicians.

<sup>4</sup> Active federal and nonfederal.

<sup>5</sup> Based on county of residence. Rates are per 1,000 population. Numerators are 2010 discharges from nonfederal hospitals located in North Carolina. Normal newborn babies are excluded. Only North Carolina residents served in North Carolina hospitals are included. Counties bordering other states may have smaller rates due to patients leaving North Carolina for hospital care.

**Table 7**  
**Demographic, Economic, and Health Resources Data**  
**C. Birth and Medicaid Statistics**

Resident Data	2010 — Percent of Births to:		Medicaid <sup>a</sup>		
	Medicaid Mothers <sup>b</sup>	WIC Mothers <sup>c</sup>	Percent of Total Population Enrolled	Per Capita Expenditure	Expenditure Per Medicaid Enrollee
<b>North Carolina</b>	<b>53.8</b>	<b>43.2</b>	<b>22.2</b>	<b>\$1,077</b>	<b>\$4,855</b>
Alamance	66.2	52.2	22.3	1,089	4,882
Alexander	63.4	51.4	22.1	978	4,426
Alleghany	71.0	48.0	25.6	1,510	5,894
Anson	57.3	68.5	30.9	1,951	6,322
Ashe	63.4	52.2	23.6	1,361	5,757
Avery	58.4	42.8	22.1	1,201	5,427
Beaufort	71.2	59.6	27.4	1,520	5,546
Bertie	80.9	66.3	32.6	1,954	5,987
Bladen	73.0	67.6	32.4	1,745	5,395
Brunswick	57.2	43.6	20.8	998	4,801
Buncombe	59.2	45.2	21.7	1,175	5,405
Burke	71.7	54.1	24.1	1,303	5,405
Cabarrus	50.3	37.4	20.3	851	4,190
Caldwell	67.0	56.5	25.7	1,240	4,826
Camden	38.0	27.2	15.4	681	4,413
Carteret	53.0	40.4	17.9	950	5,322
Caswell	69.2	54.9	26.4	1,399	5,296
Catawba	64.1	47.8	22.7	1,030	4,528
Chatham	37.6	40.4	15.9	776	4,888
Cherokee	73.3	60.4	26.1	1,576	6,046
Chowan	65.1	53.9	28.5	1,593	5,590
Clay	83.3	59.0	25.3	1,191	4,708
Cleveland	72.1	62.4	29.8	1,732	5,810
Columbus	77.1	61.8	34.4	1,792	5,214
Craven	39.3	52.0	19.7	1,024	5,186
Cumberland	40.8	46.2	24.0	1,052	4,381
Currituck	47.7	26.7	15.8	676	4,285
Dare	55.7	38.9	17.1	650	3,806
Davidson	64.5	48.1	23.5	1,097	4,664
Davie	58.9	44.0	18.9	854	4,525
Duplin	76.9	59.1	26.9	1,227	4,564
Durham	48.3	33.9	21.6	1,114	5,151
Edgecombe	83.8	72.7	37.9	1,870	4,934
Forsyth	60.5	48.4	21.8	1,017	4,658
Franklin	56.6	41.5	23.3	1,095	4,700
Gaston	61.6	48.0	26.4	1,424	5,401
Gates	48.7	15.7	20.3	995	4,899
Graham	80.4	67.4	30.7	1,831	5,970
Granville	58.7	45.9	19.6	952	4,851
Greene	71.1	63.1	26.4	1,397	5,296
Guilford	56.0	34.3	20.7	982	4,739
Halifax	81.1	67.4	36.2	1,963	5,418
Harnett	46.8	42.6	22.5	1,034	4,603
Haywood	65.9	48.8	23.9	1,311	5,484
Henderson	65.1	35.9	19.3	1,032	5,359
Hertford	77.1	56.9	31.2	1,688	5,408
Hoke	40.5	39.7	25.1	1,068	4,259
Hyde	65.6	49.2	24.5	1,242	5,074
Iredell	55.4	42.9	19.0	910	4,780
Jackson	71.4	59.1	19.8	946	4,764

<sup>a</sup> Measured by Medicaid payment for hospital stay of the newborn.

<sup>b</sup> Percent on WIC in prenatal period.

<sup>c</sup> State fiscal year 2011–2012 data.

**Table 7**  
**Demographic, Economic, and Health Resources Data**  
**C. Birth and Medicaid Statistics**

Resident Data	2010 — Percent of Births to:		Medicaid <sup>a</sup>		
	Medicaid Mothers <sup>b</sup>	WIC Mothers <sup>c</sup>	Percent of Total Population Enrolled	Per Capita Expenditure	Expenditure Per Medicaid Enrollee
Johnston	55.2	37.6	24.1	1,018	4,217
Jones	58.6	57.6	25.4	1,561	6,140
Lee	65.5	43.8	26.4	1,152	4,364
Lenoir	75.5	54.9	31.6	1,698	5,380
Lincoln	53.1	36.6	19.8	1,039	5,239
McDowell	68.0	56.1	27.4	1,435	5,233
Macon	75.9	40.2	23.8	1,175	4,930
Madison	63.6	45.1	25.9	1,436	5,541
Martin	73.9	62.1	31.3	1,817	5,799
Mecklenburg	44.6	31.8	20.8	880	4,240
Mitchell	65.9	52.6	25.9	1,563	6,027
Montgomery	76.5	63.0	30.7	1,281	4,178
Moore	51.7	31.2	18.3	860	4,690
Nash	68.3	56.9	26.6	1,218	4,571
New Hanover	50.4	42.1	18.0	996	5,531
Northampton	78.6	69.5	33.6	1,903	5,656
Onslow	20.5	43.1	15.2	640	4,219
Orange	41.1	32.0	11.9	754	6,351
Pamlico	71.2	63.5	20.4	1,270	6,212
Pasquotank	53.7	34.3	24.8	1,166	4,707
Pender	50.2	35.8	23.6	1,124	4,764
Perquimans	61.9	52.2	23.1	1,208	5,231
Person	64.3	53.2	23.7	1,262	5,320
Pitt	55.9	45.9	21.9	1,234	5,647
Polk	63.8	48.5	18.7	1,120	5,983
Randolph	69.0	53.1	24.5	1,081	4,414
Richmond	28.0	64.8	35.7	1,793	5,018
Robeson	83.0	59.2	39.5	2,033	5,145
Rockingham	63.7	53.7	25.6	1,289	5,033
Rowan	66.3	51.1	25.7	1,207	4,694
Rutherford	71.5	61.3	27.1	1,400	5,158
Sampson	74.8	60.9	33.1	1,445	4,366
Scotland	79.8	71.9	37.5	1,956	5,222
Stanly	57.8	47.7	23.1	1,195	5,174
Stokes	57.0	43.0	19.8	1,046	5,291
Surry	68.4	46.7	27.0	1,326	4,909
Swain	78.0	63.4	33.3	1,706	5,128
Transylvania	68.8	48.2	20.0	1,087	5,427
Tyrrell	76.1	60.9	25.6	1,363	5,331
Union	44.7	30.1	15.7	647	4,109
Vance	83.9	63.5	38.7	1,843	4,767
Wake	37.4	28.9	13.9	615	4,426
Warren	81.0	64.3	31.5	1,629	5,179
Washington	83.6	71.1	33.8	1,906	5,632
Watauga	47.6	38.9	10.3	548	5,340
Wayne	64.4	55.0	27.0	1,226	4,540
Wilkes	71.7	59.7	25.3	1,380	5,454
Wilson	68.0	62.1	28.3	1,453	5,135
Yadkin	65.0	51.5	22.2	1,204	5,410
Yancey	76.8	61.6	25.8	1,542	5,969

<sup>a</sup> Measured by Medicaid payment for hospital stay of the newborn.

<sup>b</sup> Percent on WIC in prenatal period.

<sup>c</sup> State fiscal year 2011–2012 data.



**Table 8**  
**Selected Health Indicators**  
**A. Pregnancy Statistics Total and Females, 15–19**

Resident Data	Pregnancy, Total								Pregnancy, Females 15–19							
	2009–2011			Percent of Live Births, 2011					2009–2011			Percent of Live Births, 2011				
	Birth Rate <sup>1</sup>	Abortion Rate <sup>2</sup>	Pregnancy Rate <sup>3</sup>	Minority <sup>4</sup>	Low Weight <sup>5</sup>	Late or No Care <sup>6</sup>	Mother Smoked	C-Section <sup>7</sup>	Birth Rate <sup>1</sup>	Abortion Rate <sup>2</sup>	Pregnancy Rate <sup>3</sup>	Minority <sup>4</sup>	Low Weight <sup>5</sup>	Late or No Care <sup>6</sup>	Mother Smoked	C-Section <sup>7</sup>
<b>North Carolina</b>	<b>63.5</b>	<b>12.8</b>	<b>76.7</b>	<b>41.4</b>	<b>9.1</b>	<b>27.4</b>	<b>10.9</b>	<b>30.4</b>	<b>39.3</b>	<b>10.8</b>	<b>50.4</b>	<b>54.8</b>	<b>10.2</b>	<b>41.8</b>	<b>12.5</b>	<b>19.9</b>
Alamance	58.3	12.1	70.8	43.5	8.2	31.7	14.0	28.4	35.8	9.8	46.0	48.0	5.6	41.2	13.6	18.6
Alexander	56.5	4.5	61.4	7.5	9.4	24.5	15.1	34.6	33.7	1.8	35.9	12.5	12.5	40.6	28.1	21.9
Alleghany	57.5	3.5	61.0	19.0	4.8	27.4	21.4	32.1	51.4	6.4	57.8	28.6	0.0	14.3	28.6	28.6
Anson	61.8	11.3	73.6	65.4	12.7	41.7	17.3	34.3	59.4	11.4	70.8	80.0	10.0	66.0	10.0	24.0
Ashe	60.3	3.2	63.6	0.9	9.1	20.9	20.9	36.5	55.7	3.7	59.4	2.9	2.9	20.0	25.7	37.1
Avery	56.2	4.3	60.9	11.3	5.6	20.4	20.4	33.8	25.1	2.5	27.6	9.1	0.0	54.5	27.3	0.0
Beaufort	69.2	8.4	78.5	49.5	7.9	18.7	13.4	36.7	61.8	9.4	71.6	69.6	4.3	29.0	7.2	15.9
Bertie	61.4	14.4	76.6	73.8	13.4	21.8	10.4	28.2	45.8	12.4	59.2	88.0	12.0	28.0	12.0	28.0
Bladen	58.9	9.0	68.3	55.0	13.2	34.8	14.9	35.7	43.5	7.5	51.0	57.1	2.9	40.0	5.7	25.7
Brunswick	63.0	9.7	73.0	22.8	7.9	36.9	13.6	32.7	39.8	8.2	48.1	31.0	4.2	50.7	15.5	18.3
Buncombe	56.4	10.9	67.6	19.6	7.0	21.3	4.1	30.3	32.1	9.2	41.5	29.9	6.4	36.3	3.4	20.1
Burke	56.5	5.9	62.6	22.4	7.0	32.3	19.7	35.4	45.5	5.3	50.9	19.1	4.5	41.8	20.0	21.8
Cabarrus	65.6	9.1	75.1	35.4	8.3	31.8	11.6	34.2	36.6	8.7	45.4	45.1	7.2	52.3	15.4	19.5
Caldwell	55.2	4.8	60.4	14.6	8.8	25.5	24.5	26.8	51.2	4.9	56.5	12.3	4.6	34.6	23.1	15.4
Camden	49.0	9.0	58.0	15.3	5.9	12.9	7.1	37.6	22.4	9.7	32.1	0.0	0.0	100.0	0.0	0.0
Carteret	56.8	10.0	67.2	15.7	7.3	25.5	18.2	34.5	35.2	10.1	45.5	20.7	8.6	34.5	24.1	15.5
Caswell	55.3	11.2	66.7	32.6	13.0	20.4	17.0	33.5	35.9	7.1	43.0	36.0	4.0	24.0	8.0	12.0
Catawba	62.4	8.1	70.8	32.2	9.3	25.3	15.2	28.3	45.5	7.9	53.4	38.1	11.5	36.2	20.6	17.0
Chatham	59.8	10.4	70.5	40.0	9.1	31.6	10.1	27.9	35.4	9.1	44.9	54.2	6.3	39.6	10.4	6.3
Cherokee	59.0	2.9	62.1	10.9	9.2	15.5	25.5	32.2	47.2	2.3	50.5	6.1	15.2	21.2	21.2	18.2
Chowan	70.5	10.3	81.4	53.2	7.5	41.0	18.5	34.7	47.7	14.6	64.7	72.7	13.6	54.5	13.6	18.2
Clay	56.0	2.5	58.4	10.1	3.8	15.2	26.6	30.4	30.5	6.6	37.2	14.3	0.0	28.6	71.4	0.0
Cleveland	60.7	8.5	69.7	33.6	8.6	30.1	22.8	32.1	51.3	8.2	60.1	43.2	9.5	39.1	19.5	20.7
Columbus	66.5	12.3	79.4	49.1	11.7	41.9	18.4	35.6	52.1	10.5	62.7	59.1	9.7	48.4	14.0	29.0
Craven	87.4	12.0	99.9	32.5	7.9	22.3	11.4	29.1	58.7	9.3	68.2	41.4	7.6	31.0	12.4	15.9
Cumberland	82.5	21.6	104.7	48.0	9.5	21.5	13.7	25.4	52.1	19.2	71.8	59.7	10.4	35.0	13.6	16.5
Currituck	53.0	12.8	65.8	10.8	6.0	17.2	8.6	33.2	36.6	14.0	50.6	8.8	8.8	32.4	14.7	26.5
Dare	65.4	15.6	81.1	21.0	7.1	19.9	9.8	43.4	20.5	13.0	33.5	9.5	0.0	38.1	23.8	33.3
Davidson	59.1	6.3	65.6	19.1	9.4	23.5	19.2	34.2	44.5	6.3	51.1	19.5	6.5	39.5	22.5	21.5
Davie	56.7	5.5	62.3	18.8	7.7	19.0	12.2	29.9	36.1	5.1	41.2	25.0	6.8	34.1	6.8	22.7
Duplin	75.5	10.7	86.8	59.4	7.2	30.6	9.1	32.1	58.5	11.2	70.1	66.4	7.5	35.5	8.4	24.3
Durham	65.8	19.8	86.0	59.1	9.3	39.0	5.6	31.3	36.8	18.9	56.0	89.8	11.3	67.6	6.9	20.7
Edgecombe	65.4	16.0	82.5	73.9	11.9	36.3	17.7	29.8	64.8	13.3	79.0	76.7	14.2	51.7	10.0	20.8
Forsyth	63.9	13.5	77.7	52.5	11.0	22.4	8.9	25.3	40.0	11.8	52.2	75.2	12.0	31.0	7.1	17.1
Franklin	57.8	11.6	69.7	30.1	10.2	37.6	14.8	27.5	32.4	11.0	43.7	48.9	8.5	61.7	8.5	21.3
Gaston	63.7	8.9	73.0	25.6	9.2	30.9	20.6	30.7	49.4	8.2	58.0	31.6	11.9	42.1	19.3	21.1
Gates	47.2	13.1	61.4	36.1	9.3	13.4	10.3	19.6	30.8	8.5	40.1	50.0	7.1	28.6	7.1	7.1
Graham	63.0	3.1	66.3	15.1	15.1	16.1	38.7	33.3	64.6	1.3	66.0	11.8	11.8	11.8	29.4	23.5
Granville	58.7	12.7	71.9	41.8	6.8	31.9	15.3	30.1	35.0	12.0	47.7	55.8	4.7	46.5	4.7	27.9
Greene	70.9	8.8	80.6	60.9	11.9	21.7	8.9	31.1	50.3	5.8	56.1	84.4	9.4	34.4	3.1	6.3
Guilford	56.5	15.2	72.1	56.9	9.9	24.2	7.6	30.5	29.9	12.0	42.2	78.7	12.2	45.8	7.1	16.8
Halifax	63.9	15.3	80.1	70.5	13.4	28.8	16.8	32.5	60.5	11.8	73.6	82.2	12.9	44.6	12.9	28.7
Harnett	68.3	11.3	80.0	35.5	8.4	28.1	13.1	30.2	39.6	12.3	52.1	49.0	9.2	49.7	13.1	20.9
Haywood	58.0	5.6	64.1	5.6	6.8	23.5	21.1	28.8	47.1	4.8	52.3	5.2	7.8	41.6	22.1	7.8
Henderson	66.2	6.9	73.4	14.8	6.7	18.8	9.6	32.7	44.5	7.6	52.4	16.3	4.1	28.6	19.4	24.5
Hertford	60.9	16.1	77.3	69.0	15.1	17.6	10.6	36.7	52.4	15.2	67.6	83.8	16.2	29.7	5.4	29.7
Hoke	87.6	14.4	102.7	48.0	10.3	23.6	10.9	26.6	57.1	12.2	69.5	70.9	15.1	45.3	5.8	17.4
Hyde	64.3	11.2	75.5	30.8	7.7	30.8	15.4	36.5	32.1	6.4	38.5	22.2	0.0	33.3	33.3	11.1
Iredell	59.4	8.4	68.2	26.1	9.0	30.5	12.1	35.3	36.4	8.8	45.5	37.3	10.2	43.4	14.5	31.3
Jackson	50.6	6.4	57.3	28.2	8.4	22.1	22.3	24.1	28.6	4.8	33.4	40.5	9.5	40.5	19.0	16.7

<sup>1</sup> Live births per 1,000 females 15–44 (15–19).

<sup>2</sup> Legal induced abortions per 1,000 females 15–44 (15–19).

<sup>3</sup> Pregnancies (reported abortions, fetal deaths and live births) per 1,000 females 15–44 (15–19).

<sup>4</sup> Based on race of mother.

<sup>5</sup> 5 lbs. 8 ozs. or less.

<sup>6</sup> Late care defined as first visit after third month. Information often based on maternal recall.

<sup>7</sup> Includes primary and repeat C-sections.

**Table 8**  
**Selected Health Indicators**  
**A. Pregnancy Statistics Total and Females, 15–19**

Resident Data	Pregnancy, Total								Pregnancy, Females 15–19							
	2009–2011			Percent of Live Births, 2011					2009–2011			Percent of Live Births, 2011				
	Birth Rate <sup>1</sup>	Abortion Rate <sup>2</sup>	Pregnancy Rate <sup>3</sup>	Minority <sup>4</sup>	Low Weight <sup>5</sup>	Late or No Care <sup>6</sup>	Mother Smoked	C-Section <sup>7</sup>	Birth Rate <sup>1</sup>	Abortion Rate <sup>2</sup>	Pregnancy Rate <sup>3</sup>	Minority <sup>4</sup>	Low Weight <sup>5</sup>	Late or No Care <sup>6</sup>	Mother Smoked	C-Section <sup>7</sup>
Johnston	66.9	9.3	76.6	36.9	7.7	22.2	10.2	30.9	42.4	9.8	52.4	54.7	7.6	37.7	10.6	17.4
Jones	61.6	16.7	79.1	39.0	9.3	21.2	13.6	35.6	35.1	7.5	43.7	63.6	9.1	18.2	9.1	36.4
Lee	76.4	16.0	93.0	47.7	12.0	39.5	15.8	27.7	60.1	16.1	76.6	64.0	20.0	46.0	16.0	15.0
Lenoir	69.1	14.5	84.1	60.4	11.8	43.1	17.2	36.2	53.0	12.4	65.4	67.9	14.3	52.4	17.9	32.1
Lincoln	56.1	6.0	62.3	9.4	9.5	30.5	16.1	42.0	39.5	7.7	47.3	15.6	14.4	45.6	23.3	36.7
McDowell	60.1	5.1	65.7	11.9	7.5	20.5	21.6	36.3	54.2	2.6	56.8	11.8	10.3	22.1	22.1	32.4
Macon	65.1	5.7	71.1	12.2	5.8	24.8	21.5	31.5	45.5	4.0	49.5	8.1	5.4	56.8	35.1	32.4
Madison	47.4	5.6	53.3	5.5	5.5	23.1	4.9	35.7	25.8	5.8	31.6	11.1	0.0	33.3	16.7	38.9
Martin	63.0	8.4	71.8	50.0	12.6	20.6	11.8	33.2	51.3	9.6	61.0	70.0	20.0	40.0	3.3	10.0
Mecklenburg	65.0	17.7	83.2	55.7	9.4	23.4	3.7	32.2	33.4	14.5	48.2	84.2	11.7	42.2	3.5	20.5
Mitchell	55.9	4.8	61.0	5.9	12.5	22.1	22.1	37.5	51.4	3.2	54.6	7.7	0.0	15.4	15.4	23.1
Montgomery	67.0	6.1	73.8	46.9	6.3	37.5	11.4	31.5	68.2	6.6	75.2	52.9	11.8	51.5	5.9	14.7
Moore	65.5	10.2	76.1	31.3	8.7	37.3	13.9	30.2	37.1	9.0	46.3	46.7	8.0	52.0	17.3	18.7
Nash	66.0	15.8	82.5	56.0	9.4	33.6	13.7	20.2	48.6	13.2	62.5	76.2	5.6	45.5	6.3	12.6
New Hanover	51.8	14.9	67.0	31.4	8.4	30.3	8.8	26.3	24.3	12.4	36.8	55.8	12.2	40.8	5.4	15.0
Northampton	60.7	17.0	78.6	70.5	11.4	26.7	11.9	36.9	46.0	16.2	62.7	92.3	7.7	38.5	7.7	30.8
Onslow	109.2	16.0	125.8	25.0	7.5	18.2	9.5	28.3	69.4	18.5	88.3	35.2	9.2	29.8	14.0	26.0
Orange	38.3	11.2	49.7	39.6	8.2	27.1	6.4	25.5	9.6	6.5	16.2	67.8	3.4	49.2	8.5	8.5
Pamlico	57.4	11.8	70.0	24.7	10.1	27.0	25.8	21.3	49.0	20.6	70.6	28.6	7.1	28.6	28.6	0.0
Pasquotank	61.4	16.0	77.8	46.7	7.0	29.3	11.2	31.4	32.5	14.5	47.0	62.8	4.7	51.2	9.3	14.0
Pender	63.9	8.3	72.5	28.7	8.0	32.7	10.1	21.3	38.3	6.2	45.2	51.5	9.1	40.9	6.1	9.1
Perquimans	62.5	11.1	73.9	27.8	8.3	21.8	12.8	41.4	37.9	7.2	45.1	83.3	16.7	33.3	0.0	33.3
Person	62.3	17.4	80.3	34.2	8.6	37.8	19.2	29.2	46.4	12.9	59.6	50.0	6.3	60.4	16.7	20.8
Pitt	51.9	13.4	65.7	50.6	10.4	16.2	10.1	28.7	27.9	9.7	38.0	73.8	14.1	29.1	9.2	16.5
Polk	48.7	6.9	55.7	13.7	7.3	23.4	16.9	30.6	25.9	5.7	31.6	10.0	20.0	40.0	30.0	10.0
Randolph	61.7	7.8	69.9	19.1	9.1	36.8	14.2	32.5	50.6	7.8	58.6	22.2	7.9	52.8	15.7	23.1
Richmond	70.4	11.7	82.6	47.2	11.8	44.7	21.8	37.9	73.4	14.3	87.7	59.7	13.4	49.6	19.3	27.7
Robeson	74.0	13.2	87.9	82.4	11.7	43.3	18.6	31.3	71.1	10.9	82.8	87.3	9.2	42.8	13.1	21.2
Rockingham	57.0	8.1	65.5	29.2	9.4	15.3	22.1	32.2	43.3	8.9	52.8	32.6	5.6	23.6	22.5	19.1
Rowan	60.4	9.1	70.0	30.9	9.5	32.6	18.0	32.1	43.6	7.4	51.7	43.0	12.8	46.3	20.1	19.5
Rutherford	61.0	7.0	68.5	17.7	10.9	20.8	21.1	29.0	51.7	5.7	57.6	24.6	14.0	22.8	21.9	19.3
Sampson	73.3	9.9	84.0	62.3	8.7	29.3	13.3	37.5	56.9	9.5	66.9	66.4	11.5	35.4	14.2	31.9
Scotland	70.2	12.5	83.1	64.6	14.7	31.9	18.8	36.5	72.2	10.9	83.1	74.2	23.7	37.6	17.2	24.7
Stanly	61.9	7.0	69.3	22.1	9.9	25.8	16.9	33.2	46.1	6.4	52.5	29.1	16.3	38.4	17.4	22.1
Stokes	50.4	5.4	56.2	6.8	7.8	17.3	23.6	27.8	28.9	5.1	34.2	7.3	7.3	29.3	24.4	9.8
Surry	63.0	6.0	69.3	13.3	7.4	24.8	23.5	28.8	49.6	5.2	55.2	13.9	5.9	31.7	23.8	12.9
Swain	74.6	6.5	81.8	43.4	7.1	23.5	26.5	21.9	62.8	5.1	67.9	50.0	10.0	30.0	26.7	13.3
Transylvania	58.9	5.7	65.0	9.2	7.6	14.9	21.0	28.6	33.0	5.5	38.4	14.3	23.8	28.6	14.3	19.0
Tyrrell	75.1	8.8	84.9	44.4	17.8	35.6	11.1	28.9	48.2	17.0	65.2	40.0	20.0	60.0	20.0	20.0
Union	60.8	8.1	69.3	32.2	8.2	30.8	8.9	30.3	28.4	7.0	35.6	54.9	11.0	52.6	5.8	23.1
Vance	69.2	14.6	84.4	60.0	11.7	46.9	14.3	30.4	70.8	12.8	84.7	68.9	15.5	51.5	5.8	16.5
Wake	61.6	15.0	77.0	44.1	8.3	30.4	3.3	29.4	22.1	11.4	33.7	77.3	10.7	60.4	5.9	15.9
Warren	62.1	17.2	79.8	64.2	15.0	26.0	12.7	23.7	50.2	12.6	63.3	69.6	8.7	26.1	0.0	8.7
Washington	65.9	9.5	75.8	66.9	8.6	44.6	15.8	33.1	58.9	5.5	64.4	88.2	5.9	52.9	5.9	5.9
Watauga	27.7	5.0	32.9	7.5	6.1	20.8	8.0	33.2	10.9	3.5	14.4	19.4	6.5	48.4	16.1	25.8
Wayne	70.7	13.5	84.7	50.2	8.6	34.0	10.9	34.4	53.2	12.3	65.8	60.5	11.4	40.0	12.4	22.7
Wilkes	58.4	4.0	62.8	14.7	7.9	20.2	23.2	34.8	49.7	3.9	54.3	10.7	7.8	18.4	20.4	27.2
Wilson	67.1	15.4	83.3	64.7	10.6	35.6	9.2	26.0	56.0	13.0	70.0	80.4	14.0	47.6	4.9	16.8
Yadkin	59.9	6.3	66.3	26.9	11.5	20.4	17.5	26.4	44.6	9.0	53.6	23.4	4.3	34.0	21.3	17.0
Yancey	60.5	4.8	65.6	2.9	7.0	21.6	18.7	36.3	53.3	8.8	62.7	0.0	9.4	25.0	34.4	18.8

<sup>1</sup> Live births per 1,000 females 15–44 (15–19).

<sup>2</sup> Legal induced abortions per 1,000 females 15–44 (15–19).

<sup>3</sup> Pregnancies (reported abortions, fetal deaths and live births) per 1,000 females 15–44 (15–19).

<sup>4</sup> Based on race of mother.

<sup>5</sup> 5 lbs. 8 ozs. or less.

<sup>6</sup> Late care defined as first visit after third month. Information often based on maternal recall.

<sup>7</sup> Includes primary and repeat C-sections.

**Table 8**  
**Selected Health Indicators**  
**B. Mortality and Morbidity Statistics**

Resident Data	Perinatal and Infant Mortality, 2007–2011 <sup>a</sup>				Population-based Mortality Rates 2007–2011			Age-adjusted Cause-Specific Death Rates, 2007–2011 <sup>b,c</sup>			Age-adjusted Cancer Incidence Rates, 2007–2009 <sup>d,e</sup>					Communicable Disease Rates, 2007–2011 <sup>f</sup>				
	Fetal Rate <sup>g</sup>	Neonatal Rate <sup>h</sup>	Postneonatal Rate <sup>i</sup>	Infant Rate <sup>j</sup>	Total <sup>k,l</sup>	Geriatric (Ages 65+) <sup>l</sup>	Injury/Violence <sup>l,m</sup>	Heart Disease	Cancer	Cerebrovascular Disease	Total	Female Breast	Lung	Colorectal	Prostate	Syphilis	Gonorrhea	AIDS	Chlamydia	Tuberculosis
<b>North Carolina</b>	<b>6.5</b>	<b>5.2</b>	<b>2.6</b>	<b>7.8</b>	<b>8.1</b>	<b>45.9</b>	<b>6.5</b>	<b>179.3</b>	<b>179.7</b>	<b>46.0</b>	<b>496.9</b>	<b>135.7</b>	<b>74.6</b>	<b>43.3</b>	<b>155.8</b>	<b>7.5</b>	<b>165.6</b>	<b>2.0</b>	<b>443.5</b>	<b>3.2</b>
Alamance	3.4	4.4	2.6	7.0	8.2	50.1	5.8	178.3	162.6	49.9	542.6	161.1	84.2	44.8	178.5	5.4	177.9	1.1	384.5	2.9
Alexander	6.6	3.1	3.1	6.2	6.6	43.5	8.5	198.0	177.3	38.3	467.9	120.1	71.9	51.3	128.4	0.5	33.7	0.5	183.1	0.0
Alleghany	2.0	6.0	2.0	7.9	8.2	45.3	10.1	206.1	164.1	35.7	450.6	92.0	82.9	47.8	165.2	0.0	3.6	0.0	90.6	0.0
Anson	11.6	3.4	1.4	4.8	9.3	50.6	9.4	189.7	188.3	70.2	451.4	156.9	70.5	44.0	137.8	3.1	406.5	2.3	660.5	5.4
Ashe	3.0	2.3	0.8	3.0	6.2	45.6	9.2	174.4	166.4	54.3	475.4	116.7	76.5	37.2	136.1	0.0	7.6	0.0	83.7	0.0
Avery	8.4	4.8	6.0	10.8	8.0	45.3	7.0	181.0	167.7	31.3	478.7	167.3	76.4	38.3	121.4	1.1	9.0	1.1	80.9	0.0
Beaufort	12.0	3.9	1.4	5.4	8.6	44.8	7.0	207.4	186.4	55.4	540.6	158.5	77.2	63.3	162.7	3.4	181.6	1.3	459.3	2.6
Bertie	12.3	11.6	5.4	17.0	9.6	53.0	9.1	193.0	195.5	52.4	524.1	145.3	81.5	65.0	163.3	10.0	286.8	3.0	742.8	7.0
Bladen	8.2	5.2	2.6	7.8	10.0	49.3	9.9	259.1	192.8	61.5	401.7	111.5	65.6	46.1	113.9	5.4	174.6	1.2	571.2	3.6
Brunswick	4.7	4.7	2.4	7.0	7.6	33.3	8.5	174.3	167.9	37.4	417.8	135.1	68.2	37.4	91.0	2.8	61.7	0.9	242.6	1.9
Buncombe	5.5	3.2	2.0	5.2	7.8	46.7	6.4	165.8	171.6	41.0	508.9	169.6	71.9	40.2	156.4	4.8	83.5	1.0	290.7	2.6
Burke	3.7	5.6	2.9	8.0	8.7	47.3	7.9	192.0	191.5	46.1	490.3	147.9	78.2	50.5	133.0	2.9	30.5	0.2	239.6	0.9
Cabarrus	6.5	2.4	1.9	4.3	8.5	51.1	7.3	178.6	182.6	47.7	590.2	163.7	92.8	44.0	206.1	4.1	97.7	0.9	366.0	0.9
Caldwell	6.3	5.2	3.8	8.9	8.9	47.8	7.8	196.9	198.1	57.1	440.6	128.8	97.6	39.4	86.8	0.5	70.7	0.5	233.6	3.5
Camden	2.1	4.2	6.3	10.4	7.3	40.8	5.7	180.3	160.2	47.1	567.6	227.2	84.5	41.9	188.8	2.0	67.6	0.0	143.5	0.0
Carleton	6.4	2.9	2.9	5.8	8.1	43.2	7.8	198.9	196.8	43.6	523.4	139.0	83.7	49.4	126.5	2.2	64.9	0.3	291.3	2.2
Catawba	3.5	12.3	2.0	15.2	8.7	47.2	8.5	204.3	178.9	24.3	460.2	137.4	75.2	43.5	120.6	3.4	112.4	1.7	296.8	3.4
Catawba	5.1	5.1	2.2	7.3	8.6	48.6	7.7	176.6	184.1	49.0	480.9	147.9	81.8	42.7	132.1	1.4	124.4	1.5	323.9	1.7
Chatham	3.7	5.2	1.2	6.3	7.0	43.5	5.9	163.2	160.4	45.5	363.7	113.5	47.1	30.7	112.6	3.2	48.5	0.9	192.9	1.9
Cherokee	4.1	5.0	4.2	9.1	8.3	41.7	10.9	212.5	180.1	35.4	501.5	160.5	74.3	45.9	86.9	1.5	6.7	2.2	117.9	1.5
Chowan	6.6	3.3	3.4	6.7	8.3	46.3	6.4	178.2	215.2	55.9	476.5	123.6	78.5	39.3	159.0	1.4	208.5	0.0	483.4	2.7
Clay	0.0	4.9	7.4	12.3	7.6	39.5	10.0	175.5	162.5	30.8	469.7	114.6	72.8	40.4	106.6	1.9	7.7	0.0	73.2	0.0
Cleveland	7.5	7.0	2.9	9.8	9.4	51.9	8.6	214.5	189.3	51.7	497.6	120.7	82.0	49.2	188.4	3.3	170.1	2.6	403.3	1.4
Columbus	8.1	6.5	5.7	12.1	10.2	51.8	10.8	250.2	198.4	65.0	456.6	132.7	76.8	45.9	129.1	2.2	189.7	3.6	473.5	3.2
Craven	6.6	5.6	3.0	6.6	8.1	44.1	6.4	175.6	189.2	47.0	521.3	154.8	64.5	41.7	173.9	9.4	168.9	4.2	802.9	4.2
Cumberland	7.7	5.9	3.1	9.0	8.9	45.6	6.8	206.0	193.4	45.8	490.4	152.4	79.8	44.1	127.2	8.2	360.9	3.4	799.9	2.3
Currituck	2.5	5.9	6.8	12.6	8.7	45.7	8.0	195.0	199.6	26.5	470.9	112.2	72.8	48.4	174.0	0.8	68.5	0.0	177.9	0.0
Dare	4.6	4.6	1.0	5.6	7.3	37.8	6.4	182.4	168.1	29.2	500.4	200.9	74.7	45.2	134.8	1.2	44.6	0.0	185.2	1.2
Davidson	4.7	4.2	3.7	7.9	8.8	48.5	6.8	209.3	182.2	51.9	500.4	141.0	93.2	47.1	130.1	2.5	70.9	0.6	266.6	1.8
Davie	2.4	2.8	2.9	5.7	7.3	42.1	7.4	157.8	168.5	38.0	478.0	137.9	74.9	26.6	140.3	1.9	39.8	0.0	179.3	0.0
Duplin	8.1	7.9	1.7	9.6	8.6	46.6	8.1	190.0	170.7	50.1	442.7	127.2	69.7	33.5	113.2	5.4	121.1	1.4	406.7	9.4
Durham	6.4	4.5	2.2	6.7	7.6	46.2	5.6	146.1	184.5	41.9	491.8	165.6	72.4	39.3	163.8	13.0	265.4	2.5	580.2	4.7
Edgecombe	16.4	8.6	2.4	11.0	10.5	57.3	8.5	233.2	227.0	95.2	533.0	146.5	87.8	56.1	181.8	20.8	550.2	4.1	1094.0	5.6
Forsyth	4.9	6.9	3.3	10.2	7.7	45.6	5.6	140.8	180.7	45.2	503.1	160.5	69.5	34.7	175.7	24.0	227.3	1.7	721.8	3.2
Franklin	5.2	4.0	2.6	6.6	6.3	44.6	6.9	174.1	197.3	42.1	481.5	139.6	85.7	40.5	189.9	5.7	131.6	1.0	256.7	2.3
Gaston	6.6	5.9	3.0	8.9	9.4	51.9	7.6	219.7	193.4	43.3	506.1	146.3	81.1	53.0	151.9	4.7	179.2	1.1	434.0	1.3
Gates	12.5	7.2	0.0	7.2	9.2	50.1	6.8	195.0	208.9	36.6	474.1	215.3	64.4	38.4	148.0	3.4	126.1	0.0	351.3	0.0
Graham	4.3	4.3	4.3	8.6	8.3	41.3	9.9	208.4	167.7	25.7	501.3	152.6	69.0	53.3	94.3	2.4	7.2	0.0	113.1	2.4
Granville	5.5	2.9	1.3	4.2	8.8	47.3	6.5	188.0	224.5	50.2	567.6	160.0	84.8	65.8	176.0	2.8	134.4	1.4	360.3	1.4
Greene	11.3	7.3	6.6	13.8	8.9	52.0	6.6	221.0	195.8	69.0	490.3	144.6	77.9	40.2	165.7	7.6	210.7	1.9	550.0	17.2
Guilford	7.0	7.1	2.3	9.4	7.6	45.7	5.9	157.8	167.3	42.3	542.1	166.1	75.1	45.0	195.1	14.7	278.4	2.2	624.9	5.5
Halifax	10.3	6.3	4.3	12.6	9.5	50.2	7.6	226.5	210.2	52.9	539.1	175.1	82.5	46.9	185.6	6.9	316.4	2.9	747.8	6.9
Hamett	5.8	5.5	2.5	8.0	5.8	48.0	7.0	205.3	185.9	49.3	434.8	147.4	77.9	37.8	120.3	1.4	125.7	1.1	319.5	3.5
Haywood	7.5	3.5	1.4	4.9	7.8	43.8	7.5	194.8	171.0	44.0	498.8	154.9	65.1	34.7	151.0	2.1	18.0	0.3	146.9	1.7
Henderson	4.6	2.9	2.2	5.2	7.4	44.0	3.4	164.1	160.5	37.8	528.6	170.9	69.7	36.2	166.4	1.5	47.2	1.7	157.5	5.2
Hertford	5.6	10.5	5.0	15.4	9.3	53.0	5.6	178.9	226.3	58.7	458.0	163.8	64.8	51.3	134.5	3.4	306.7	7.6	724.2	5.9
Hoke	7.0	4.4	3.1	7.5	9.3	48.9	7.6	246.4	207.5	34.2	344.3	112.0	82.7	36.6	94.7	2.6	185.6	1.8	417.9	3.5
Hyde	3.8	7.7	3.9	11.5	9.0	55.7	6.7	192.9	231.0	83.0	521.0	218.3	93.4	62.1	126.9	7.3	76.9	0.0	322.4	7.3
Iredell	6.5	3.7	2.7	6.3	8.5	48.0	6.7	200.3	181.3	48.4	501.2	148.0	71.6	47.9	172.7	1.1	143.5	0.4	294.0	0.6
Jackson	5.7	6.2	2.4	8.6	7.9	41.1	8.2	174.6	174.1	28.5	508.2	138.2	63.3	50.9	143.7	2.1	45.1	0.0	296.8	2.1

<sup>a</sup> All rates are average for the 5-year period, 2007–2011.  
<sup>b</sup> Stillbirths of 20+ weeks gestation per 1,000 deliveries (live births plus stillbirths).  
<sup>c</sup> Deaths under 28 days per 1,000 live births.  
<sup>d</sup> Deaths 28 days to 1 year per 1,000 neonatal survivors (live births less neonatal deaths).  
<sup>e</sup> Deaths under 1 year per 1,000 live births.  
<sup>f</sup> Rate age-adjusted to the 2000 U.S. population.  
<sup>g</sup> Deaths per 1,000 population.  
<sup>h</sup> Deaths per 10,000 population; consists of homicides, suicides, unintentional injuries, legal interventions.  
<sup>i</sup> Deaths per 100,000 population.  
<sup>j</sup> 2007–2009 reported cases per 100,000 population. The female breast cancer rate uses the female population and the prostate cancer rate uses the male population in the denominator.  
<sup>k</sup> Cases per 100,000 population.



**Table 8**  
**Selected Health Indicators**  
**B. Mortality and Morbidity Statistics**

Resident Data	Perinatal and Infant Mortality, 2007–2011 <sup>8</sup>				Population-based Mortality Rates 2007–2011			Age-adjusted Cause-Specific Death Rates, 2007–2011 <sup>13,16</sup>			Age-adjusted Cancer Incidence Rates, 2007–2009 <sup>13,17</sup>					Communicable Disease Rates, 2007–2011 <sup>18</sup>				
	Fetal Rate <sup>9</sup>	Neonatal Rate <sup>10</sup>	Postneonatal Rate <sup>11</sup>	Infant Rate <sup>12</sup>	Total <sup>13,14</sup>	Geriatric (Ages 65+) <sup>14</sup>	Injury/Violence <sup>15,16</sup>	Heart Disease	Cancer	Cerebrovascular Disease	Total	Female Breast	Lung	Colorectal	Prostate	Syphilis	Gonorrhea	AIDS	Chlamydia	Tuberculosis
Johnston	5.7	4.9	1.9	6.9	6.7	47.1	7.1	244.9	186.6	43.1	450.2	127.0	86.5	43.5	136.8	2.8	84.7	1.1	265.5	4.2
Jones	8.0	18.2	4.1	22.3	9.4	52.3	5.2	251.2	200.6	62.7	500.4	120.8	84.1	42.9	149.3	2.0	125.4	0.0	370.3	0.0
Lee	7.2	5.6	2.3	7.9	7.9	43.2	7.7	191.0	168.4	44.0	546.5	181.8	94.5	50.9	106.3	5.4	133.0	2.0	367.9	4.1
Lenoir	7.9	6.6	2.8	9.3	9.7	51.3	7.5	240.7	206.5	52.5	622.3	172.4	102.3	63.4	247.5	6.9	268.9	3.1	576.3	7.6
Lincoln	4.4	5.4	2.1	7.5	9.0	48.6	7.2	248.3	176.8	52.9	476.2	138.8	71.8	38.0	155.4	1.1	56.2	0.0	217.7	0.0
McDowell	7.6	2.0	2.4	4.4	8.4	45.2	8.2	194.1	189.5	45.6	556.8	174.0	88.4	57.3	150.8	1.4	50.5	0.9	175.1	1.4
Macon	5.0	4.5	2.8	7.3	7.5	40.1	7.5	174.0	170.0	39.8	483.4	178.0	76.2	40.5	124.0	1.8	9.0	0.0	146.1	1.2
Madison	9.7	3.3	5.5	8.7	8.1	46.2	7.5	186.4	178.7	50.4	560.9	175.3	87.3	41.0	142.3	3.9	28.3	0.0	140.3	0.0
Martin	6.5	7.3	1.5	8.7	10.0	54.7	9.0	275.4	185.6	74.1	459.7	131.8	72.8	47.5	200.6	6.7	211.5	3.4	615.3	3.4
Mecklenburg	7.1	3.9	2.2	6.1	7.2	43.0	4.6	142.6	166.0	40.6	496.3	176.1	60.4	40.2	176.1	16.8	195.5	3.9	522.1	4.2
Mitchell	5.2	1.3	1.3	2.6	6.7	49.1	7.5	224.5	186.4	52.1	455.7	100.6	76.0	41.7	141.0	0.0	3.8	1.3	89.7	1.3
Montgomery	8.3	10.0	2.2	12.5	6.0	43.1	8.7	159.9	145.5	43.5	440.6	116.3	81.0	38.3	132.4	2.2	90.2	5.7	287.6	10.1
Moore	6.5	4.7	2.5	7.2	7.0	41.9	7.0	136.2	166.7	37.8	529.1	171.5	72.9	34.4	156.6	3.0	104.3	1.6	274.6	2.1
Nash	10.9	7.6	2.7	10.2	8.8	46.0	6.8	167.5	186.9	48.4	470.2	148.6	67.2	47.8	127.6	12.7	273.0	3.6	604.4	1.9
New Hanover	4.9	2.6	1.8	4.4	7.5	42.9	6.2	180.2	179.2	36.9	494.3	163.0	74.0	37.6	113.1	8.3	151.6	2.5	441.5	2.1
Northampton	10.1	1.8	5.6	7.4	8.6	44.8	9.2	195.0	196.0	43.0	502.7	151.6	71.9	56.3	210.0	6.6	309.6	1.9	624.0	2.8
Onslow	5.2	4.7	2.7	7.4	8.3	42.5	6.4	187.0	189.3	38.9	524.1	148.1	93.1	41.4	128.9	1.6	157.7	0.3	630.4	1.9
Orange	4.3	5.0	1.8	6.9	6.5	39.2	4.6	138.0	156.3	34.9	515.6	188.1	59.4	36.2	154.5	3.7	71.5	0.6	279.7	3.5
Pamlico	7.7	5.8	3.9	9.7	8.0	38.7	10.0	163.6	174.4	54.7	420.5	122.8	77.7	28.0	132.5	1.6	62.9	0.0	271.9	0.0
Pasquotank	7.4	7.8	3.4	11.1	8.3	48.8	5.3	204.3	199.8	49.1	490.2	156.6	72.7	49.0	166.6	3.9	286.6	1.0	541.9	1.9
Pender	4.0	5.0	2.0	7.0	7.6	38.6	8.0	146.6	176.5	40.2	451.0	119.1	67.4	37.7	106.5	3.9	64.9	0.4	253.7	1.9
Perquimans	4.4	13.3	1.5	14.8	7.4	37.2	4.7	196.8	186.1	36.0	438.5	135.5	78.8	46.6	116.3	0.0	137.2	1.5	345.6	0.0
Person	9.1	5.3	1.3	6.6	9.4	52.5	8.1	197.4	207.0	82.7	503.3	112.7	87.3	58.5	147.9	1.6	92.4	3.1	366.0	1.6
Pitt	8.8	6.8	3.2	10.1	8.3	46.9	6.2	186.2	181.2	49.9	505.0	182.0	65.7	46.5	166.0	8.6	343.1	2.8	894.1	4.3
Polk	5.5	4.2	4.2	8.4	7.5	49.4	7.5	157.8	161.7	36.7	466.7	153.1	69.8	35.1	138.0	1.0	28.6	1.0	107.7	2.0
Randolph	5.5	5.0	2.1	7.0	8.5	47.4	7.6	179.7	182.2	43.4	508.8	153.6	89.1	43.6	145.4	2.7	52.1	0.6	221.2	0.4
Richmond	6.8	6.6	1.3	7.8	10.4	56.4	8.7	258.9	224.8	68.4	509.0	129.8	80.1	45.5	159.3	1.3	208.9	3.0	463.7	4.3
Robeson	7.8	9.5	3.9	13.4	10.0	49.5	10.2	226.7	197.4	47.1	485.2	133.3	77.8	47.3	185.4	6.1	365.1	3.7	773.7	11.7
Rockingham	6.9	6.6	2.8	9.3	9.1	49.9	8.3	202.8	195.3	51.3	533.1	151.0	97.0	53.1	141.2	4.1	120.9	0.9	330.4	2.4
Rowan	7.7	4.6	2.2	6.8	8.7	50.8	7.7	188.7	182.8	53.5	489.2	174.2	76.4	39.4	141.2	3.6	170.4	1.6	404.4	1.7
Rutherford	6.5	3.8	3.0	6.9	9.4	52.9	7.5	217.0	204.3	55.2	360.4	174.1	81.0	56.8	151.3	2.8	95.3	0.3	300.6	0.6
Sampson	9.5	8.7	4.1	12.6	9.1	48.0	10.1	195.4	192.5	57.2	408.4	129.4	75.8	40.0	89.8	3.2	173.0	3.5	365.8	7.9
Scotland	8.2	7.1	4.0	11.0	9.9	52.7	8.2	234.5	217.4	59.1	547.0	117.9	93.4	58.0	235.5	2.2	321.2	3.9	589.3	5.0
Stanly	6.5	4.9	2.0	8.9	6.7	50.1	8.2	214.7	181.6	49.2	542.3	160.4	87.3	42.5	133.5	1.7	122.1	1.3	345.5	2.0
Stokes	5.1	7.9	3.7	11.6	8.5	45.5	8.2	159.9	179.3	59.0	399.1	117.6	71.3	31.4	93.0	4.3	27.9	0.9	181.6	0.0
Surry	6.0	7.9	3.3	11.2	8.9	51.7	8.0	192.8	199.6	48.2	553.5	160.0	99.3	52.1	139.0	1.4	26.1	0.0	160.8	1.1
Swain	11.7	3.2	3.2	6.5	11.0	53.3	12.2	284.4	203.3	62.7	590.4	190.3	113.8	48.4	88.1	0.0	29.3	0.0	306.7	0.0
Transylvania	5.5	2.1	4.2	6.2	7.0	39.6	8.5	160.3	144.6	34.3	497.6	160.4	50.1	40.8	182.8	0.0	0.0	0.0	0.0	2.6
Tyrrell	8.0	4.0	4.1	8.1	9.9	55.2	9.8	261.4	249.6	40.7	522.8	196.3	82.6	33.1	123.1	0.0	142.1	4.7	506.8	0.0
Union	4.3	4.2	1.5	5.6	7.8	43.7	5.0	172.4	159.5	44.6	407.4	146.5	54.2	33.4	125.2	1.4	88.6	0.9	207.7	1.1
Vance	10.7	7.6	3.5	11.1	9.2	45.3	9.2	201.6	197.6	53.7	550.4	147.8	75.3	62.8	207.8	6.4	394.6	3.6	824.7	0.9
Wake	5.3	4.7	2.0	6.7	6.5	39.2	4.1	137.5	157.3	43.6	507.2	169.7	82.1	38.7	185.1	7.9	131.6	3.0	423.8	4.3
Warren	7.9	8.0	3.0	11.0	8.0	42.8	5.9	190.8	191.6	42.5	469.4	139.3	75.5	63.1	180.3	4.0	271.2	0.0	548.3	4.0
Washington	5.1	10.2	5.2	15.3	8.9	51.3	3.4	341.6	155.8	54.1	451.4	154.5	63.1	55.2	167.1	7.7	195.7	7.7	574.9	0.0
Watauga	4.3	4.3	1.1	5.4	6.2	39.3	7.1	173.4	156.8	32.2	485.3	157.8	55.0	38.6	155.0	0.8	14.3	0.0	151.3	0.6
Wayne	8.2	7.1	2.8	9.9	9.4	49.8	7.6	199.8	201.6	54.9	521.5	150.9	81.6	52.2	156.6	28.3	221.9	3.4	616.2	6.1
Wilkes	6.0	4.9	2.7	7.6	8.4	44.0	10.0	165.2	188.1	46.1	489.1	142.6	81.5	52.1	135.3	0.9	18.9	0.6	191.0	1.8
Wilson	11.1	6.2	2.4	8.6	8.9	49.7	7.1	183.3	211.8	44.4	523.6	163.5	77.6	48.4	137.4	6.3	371.3	4.0	769.9	6.1
Yadkin	4.1	5.1	2.8	7.8	8.4	47.5	8.2	189.8	190.7	41.3	491.5	141.1	85.0	34.0	147.0	2.6	38.0	1.1	152.4	0.5
Yancey	7.8	1.1	5.6	6.7	7.8	45.3	6.9	176.4	184.4	40.4	557.4	161.3	58.1	52.0	153.1	1.1	95.4	1.1	115.4	0.0

<sup>8</sup> All rates are average for the 5-year period, 2007–2011.  
<sup>9</sup> Stillbirths of 20+ weeks gestation per 1,000 deliveries (live births plus stillbirths).  
<sup>10</sup> Deaths under 28 days per 1,000 live births.  
<sup>11</sup> Deaths 28 days to 1 year per 1,000 neonatal survivors (live births less neonatal deaths).  
<sup>12</sup> Deaths under 1 year per 1,000 live births.  
<sup>13</sup> Rate age-adjusted to the 2000 U.S. population.  
<sup>14</sup> Deaths per 1,000 population.  
<sup>15</sup> Deaths per 100,000 population; consists of homicides, suicides, unintentional injuries, legal interventions.  
<sup>16</sup> Deaths per 100,000 population.  
<sup>17</sup> 2007–2009 reported cases per 100,000 population. The female breast cancer rate uses the female population and the prostate cancer rate uses the male population in the denominator.  
<sup>18</sup> Cases per 100,000 population.



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August 2013

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The Center for Public Health Quality  
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A blue ink signature of Greg Randolph, MD, MPH, written over a horizontal line.

Greg Randolph, MD, MPH  
Director, Center for Public Health Quality



A blue ink signature of Laura Gerald, MD, MPH, written over a horizontal line.

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2013